

In principal, do you agree or disagree that assisted dying should be permitted for terminally ill adults on the Isle of Man?	In principal, do you agree or disagree that assisted dying should be permitted for terminally ill adults on the Isle of Man?	If you agree they should be permanent residents please state for how long.	If you agree they should be permanent residents please state for how long.	Do you have any comments on the process to provide Assisted Dying which will be included in the draft Bill
Agree		Not Answered		
Agree	Having seen loved ones in pain and wasting away in front me , and asking to die , they should be able to decide when to pass	Not Answered		
Disagree	Safeguards for the vulnerable in all jurisdictions where it has been introduced have come to be seen as barriers to access, and have been progressively relaxed. Suicide will become normalised, and seen as a solution to life's existential problems, and non assisted suicide has increased in jurisdictions where this has been legalised. More and more lives will be considered as less valuable and expendable. Victims of abuse will have been silenced by death. Doctors and nurses will become used to killing. Remember Hitler - first the disabled, then the gay community, then Jews - but getting people to kill themselves, so much easier and cheaper. Remember Harold Shipman - you'd never even find him if this gets legalised. It will be the means of modern eugenics.	Other	These questions are ridiculous: you don't give space to those who object!!!	This survey is completely ridiculous and unscientific. The questions don't include space for someone to disagree at every stage. Each question assumes the bill is going ahead and can't be stopped. Utterly incredible. No space for comments at each point. Each question should state at the startb 'if this Bill were to become law...' and have a box 'prefer not to answer'
Disagree	Excellent palliative care is already available on the IOM, and therefore there is no need for an assisted dying bill, which could easily be mismanaged and compromised over time. More education needs to be given to cut the sigma that still exists of the Hospice environment where you 'go to die'. It should be as Cicely Saunders advocated, to live until you die. With good symptom management no-one should die in pain as the majority of symptoms can be managed adequately.	Not Answered		There should be outside persons viewing of any comments made and not just decisions made by one person to take this bill forward, as this leads to bias and unethical practice This all comes down to how we value life in this disposable world.
Agree	I have watched my Mother and mother-in-law die slow painful deaths where death was the only outcome. You wouldn't let an animal suffer so why should you have to watch your loved ones starve and dehydrate to death.	For over 5 years		
Agree	I've seen friends suffering in great pain and kept alive to suffer further.	Not Answered		
Agree	Object to religious entities forcing the dying to suffer unnecessarily especially if the dying person has no religion. It is barbaric. Allowing an animal to suffer a prolonged death would result in prosecution.	For over 1 year		Not yet

Agree	I have long held this view. We currently treat animals with greater "humanity" where there is obvious suffering with an inevitable outcome. This choice is a basic human right.	Not Answered		Have three Dr's to determine competency to avoid deadlock. 14 days is too long. If the process pre issuance of medication is sufficiently robust there should be no need to prolong suffering further. I see no reason why this should be restricted to IOM residents. This is an opportunity for the IOM to take the lead in this ethical issue, mitigating suffering and pain for many in the UK who are denied the choice, or whom face a very difficult or sometimes impossible trip to Europe.
Agree	It is ridiculous not too, you wouldn't keep a dog in the state we keep terminally ill or elderly people. You would be done for cruelty.	Not Answered		You do not let an animal suffer like we do humans
Agree	I believe that you should have the right to choose to die rather than have endless suffering.	Not Answered		I believe that we should have the right to choose to die.
Agree	Yes, my experience has made me absolutely believe that it would be significantly better to give those who are suffering back control of their life.	Not Answered		How is it going to interact with life insurance policies etc?
Agree	No friend, relative or doctor should have the right to determine someone's quality of life. Even if someone is disabled but not dying, no one has the right to prevent them from choosing a dignified death. Their body, their choice. Just because someone can be tube fed, have their bladder and rectum emptied does not mean they should be forced to live in that condition. If a person cannot attend to their own care needs, no one has the right to force them to live without dignity. Assisted dying should be available to any adult even though they are not terminally ill. Their body, their choice.	Other	People are not required to be permanent residents of switzerland.	
Agree	Why should people live on in pain or distress or with very limited life benefit if they do not wish to do so.	Not Answered		
Agree		For over 5 years		I think in addition to 2 doctors someone outside the medical profession should be involved to process, perhaps a judge.
Agree		Not Answered		
Agree	People should be given the right to pass with dignity	Not Answered		Each individual should have the choice as to whether they live or die, whether they are mentally fit to make the decision or not, it should not be decided by a third party who is unknown to the individual or their family
Agree	There are too many medical conditions in which the individual suffers a slow, tortuous, degenerative decline. I personally would want the freedom to put myself out of my misery were I ever to find myself in those dreadful circumstances.	Not Answered		I fully support the proposal. We could lead the way in the UK. Internationally, we would be perceived as a forward-thinking, compassionate country. Ignore the protesters - no one is being compelled to participate!
Agree		For over 1 year		Re an annual report, I don't think it is necessary. In addition, knowing that suicide numbers go up when there is a report of a high profile person taking their own life, I think it might do the same for people who do have some hope but are in a dark place at that particular time. I think the list should be kept private.

Agree	People shouldn't be allowed to suffer in a terminal illness. We treat animals better	For over 5 years	
Agree	I believe we all have a right, when given the opportunity, to decide how our lives end. The indignity, pain and suffering that is often endured by the terminally ill towards the end of their lives is not something that anyone should be forced to go through. It is something we consider cruel when treating our pets and the idea that a person is forced to suffer in this way is outdated and cruel.	Not Answered	Care doesn't stop at death. How we die is an extremely important part of being human, not just to the individual that dies but to those around them who are left behind. Knowing that someone I care for had total control of how and when they died when facing a long term or terminal illness would give me huge comfort during the grieving process.
Agree	Because I believe that we should all be able to control our own destiny, especially in the face of a terminal illness. In response to the next question about life expectancy, I think that depends entirely on the condition and prognosis. For eg. Motor Neurone Disease can have a very long, slow and painful (mentally) deterioration, so I'm not sure that a time limit should be put in place?	Not Answered	
Agree		Not Answered	
Agree	Both my parents suffered badly and had a terrible quality of life for over 12 months prior to dying despite not being classified as being terminally ill. My mother said that every evening she prayed that she would not wake up in the morning.	Not Answered	
Agree	Gives people control over there own lives.	For over 5 years	1 of the doctors should be totally unconnected to the pt and there care. Age depends on there ability to consent themselves. Living will not sufficient as they may change their mind once they are in that situation. The decision should only be valid for a certain length ot time, and then would have to be reassessed. (4 weeks).
Agree	People should have the right to end their life when they want to rather than suffer a painful death, loss of dignity and at a time of their choosing in surrounding they choose with people they choose there.	Not Answered	
Disagree	Experience with close relatives and friends has shown that existing palliative care does effectively end a suffering life. Whilst the safeguards for more direct action seem reasonable, I remember the same arguments being used for abortion - then those requirements progressively diluted. I suspect something similar would happen with this legislation. I also found the introduction biased to one conclusion!	For over 5 years	The wording of most questions assumes that the bill will go ahead and that you are only consulting about the details of implementation. Having witnessed lives appropriately shortened under existing legislation, I doubt the need for further liberalisation and fear that this Bill would open the door to future, wider application.
Agree		For over 5 years	

Agree	<p>After reading, there is no mention of Alzheimer's/Dementia and I class this as a terminal disease! I have watched my grandma, mum and my mums brother die a horrid death, suffer for 10 years before the end came with no dignity. My mum said she wanted us (her children to smother her if she ever ended up like her mum in the home) and that's where she ended up and she suffered and died the same horrid prolonged death. There was nothing we could do! Watching her caused my dad to suffer along with the rest of her close family.</p> <p>Myself, brother, sister and my children are next in line now thinking this is hereditary.</p> <p>I would like to be able to put something in place for myself whilst I am of sound mind so with the discretion of my 3 daughters to decide it's time for me not to suffer anymore with this terrible disease. I already have PoA in place for everything else so why not this. It's my life and I trust my daughters.</p>	Not Answered	<p>If a terrible illness is hereditary and you could become NOT of sound mind once diagnosed as with Alzheimer's, I would ask for a process of allowing my written Will to take over with my daughters making my decision for me.</p>
Agree	I feel this should be a subject all should be able to choose	For over 1 year	
Agree	People should be able to choose when they feel it is their time to die, rather than having a prolonged period of illness, suffering etc	For over 1 year	
Agree	People should be able to decide their own destiny with dignity whilst they are still capable of doing so, without placing relatives at risk of persecution by supporting them making a life ending decision	Not Answered	
Agree		For over 5 years	
Agree		Other	<p>Once someone decides that they want to die then they need to be deemed of sound mind by 2 independent Gps. I don't think they should be allowed to take the medication home or store it securely as they might leave keys or someone could take them or steal to sell. People should choose a day and time and a Gp should watch them take the meds and stay until they have entered their system. Leave and return in an hour or whenever the meds have worked. Someone might want to be on their own or with loved ones and they want to feel in control. Just my opinion as how I would probably want to end my life.</p>
Agree	My husband died, painfully, from small cell lung cancer in 2000. He would have welcomed the choice of how and where to die. His death was distressing although under hospice care.	Not Answered	<p>Please make the passing of this bill as speedy as possible. Many people are now suffering, or want the assurance that their death shall be what they wish it to be.</p>

Agree	Any person who has been diagnosed with a terminal illness should be allowed to make their own decision about being in control of how their life should end.	For over 1 year		The process should take place in a recognised clinical setting. It should only be allowed at the patients home as long as the two doctors involved in the process are present for the process up to that point. No relative should be involved in obtaining the relevant medication, that part of the process should always involve registered medical professionals.
Agree	I am pro choice and believe the right to end your life should be for the individual. I also believe people should be able to state their wishes legally so if they become non capacity and for example are unable to feed themselves, are bed bound or have sat 12 months they should be able to have the drugs administered by a nominated family member or doctor when this times comes. For context.. My father died of huntingdons disease and was ill for a long period culminating in his last 4 years in a nursing home, being tube fed and choking almost daily. Basically a very cruel end. My mum has just had a similar end. Sat in a nursing home, which she explicitly never wanted, for 3 years slowly deteriorating and for last 2 years bed bound, angry, combatative and surviving on minimal food in liquid form, incontinent. The last 4 weeks she struggling to breath and was pretty much out of it and looked in pain and extremely sad.	Other	5 years seems unreasonable. Maybe 3.	
Agree	Allowing an individual to end their own suffering is an essential human right in my opinion. To die with dignity.	For over 5 years		
Agree	I watched my mother die through terminal cancer and all she wanted was to die with dignity, not stuck in a bed with no mobility, bed baths or being able to use the bathroom. The loss of her independence destroyed her and by the time she was told her cancer was terminal she wasn't well enough to travel to Switzerland which is how she always said she would do in that situation. There is no way I would ever put my husband or children through what I went through with my mother and that extends to having dementia. We also nursed my grandmother through dementia over ten years and she died two months before my mother.	For over 5 years		Regarding question 26, it's a personal choice and I do not believe it should be published. Likewise it isn't up to the government to legislate my life choices, if I have a terminal illness and a safe, controlled environment isn't available to me, I would find a way to end it on my terms and my family should not be punished for what they knew or suspected regarding my choices.
Agree	People should be able to choose the way in which they end their lives, especially if the alternative is a long drawn out and painfull, humiliating ending.	Not Answered		If it is right and proper that an animal or family pet can be "put down" to end suffering and to let an animal die in a decent and dignified way ... why shouldn't humans have the same choice and rights?
Disagree	We have an excellent Hospice. We have mostly excellent caring people in the NHS (with the exception of Dr Allison), who honour the “ do no harm” Drs sign up to. In many jurisdictions where this has been adopted the law quickly expands and many vulnerable people die as a result. Hospice’s loose money and have to reduce those they can help. Suicide rates go up.	Other	I disagree with any assisted death bill. I definitely do not want the Isle of Man to be a tourist death place.	This is not a well researched or well thought out process. This bill is both dangerous and totally unnecessary. Why do we need it? We have excellent palliative care here, where people are able to live until they die. Dr Allinson is scaremongering and a disgrace to his “profession”. We do not need this and do not want this bill.

Agree	Everyone should have the choice to end their own life lawfully if they are terminally ill and are in chronic pain.	For over 5 years	
Agree	Relief of suffering should be permitted for the terminally ill who wish it for themselves	Not Answered	If method is to be in the Bill then the Swiss Sarco Nitrogen Capsule option should be included
Agree	Having nursed a family member when they were dying and seen how distressing the process of dying was for them it would have been much kinder if they could have been able to choose not to go through the process. When an animal is close to death we make a choice end the suffering and it would be nice to have that option if I was suffering from a terminal condition	Not Answered	In my opinion quality of life should be more important than quantity of life
Agree		For over 5 years	
Agree	1) The life of a person is solely the property of that person. Denying the right to die at the time of their choosing is as much an infringement as prematurely terminating their life against their will. This is absolutely fundamental, anyone who inhibits someone from killing themselves while "of sound mind" is depriving that person of their freedom to control their own life. 2) I personally have both i) lost a close family member who chose to end their life prematurely when access to suitable drugs was easier than today, and ii) witnessed another close family member who would probably had preferred to end their life sooner in preference to enduring their painful, debilitating and disabling terminal illness to the bitter end. Very simply, people should have the choice. It is their choice to make, it is not for any of us to deny a person right of control over their own life.	Not Answered	
Agree	I've seen both of my parents suffering before they eventually passed	For over 1 year	
Agree	I feel it should be a personal choice if you are terminally ill to end your life with some dignity.	For over 5 years	
Agree	As Alzheimer's is in my family and have watched people I love become a living vegetable in front of my eyes who do not recognise me, if I am next I want to be able to have the choice in choosing when I decide to die. If I do not get this option then I will have no choice but to end my life so I do not become dependent on others and loose my dignity.	Not Answered	It is only mentions terminally ill people not people with dementia/Alzheimer's who would wish to make provisions before they become mentally incapable of choosing the right to die before loosing the right to make a decision of when to end their life.
Agree	It's against human rights to not allow a person who is terminally ill the choice to carry on struggling in vain or ending what for some is a miserable life.	Not Answered	
Agree	Both of my parents suffered horribly in the latter stages of their lives. In spite of kind medical care they had no quality of life in their last six months and both had said they would be interested in the possibility of assisted dying when the appropriate time came.	Not Answered	I'm a bit concerned about the need to write. Both my parents were unable to write in the last months of their lives. Verbal consent or even a nod would have been all that was possible
Agree	Freedom of choice Respect for individual agency	Not Answered	I think this would be a really welcome and progressive law change here on the Island.

Agree	We put animals down who are suffering, why let a human continue to suffer when they can cognitively make their own decision.	For over 1 year		
Agree	After watching my wife die from ovarian cancer neither of us could understand why she was allowed to endure dreadful pain after the pain relief medication finally failed to work. Letting "nature take it's course " as it was described by one medical professional seemed cruel, unnecessary and ultimately pointless.	Other	3 years, hopefully that would prevent the island from becoming a terminal destination (no pun intended).	Only that it is a compassionate and humane approach to preventing unreasonable, unnecessary and uncivilized suffering. It is legislation that should be enacted and is a sign of a mature and developed society.
Agree	The right to life is meaningless if it exludes the right to die	Not Answered		Previous comment: the right to life is meaningless if it exludes the right to die.
Agree	Some ill people are suffering more being alive than being dead.	Not Answered		
Agree	People should have the choice to end their life without suffering or indignity if that's what they want, it's nothing to do with anyone else or group.	Not Answered		
Agree	I have seen 2 people with terminal illnesses die in the last year. I saw the tremendous pain that those individuals suffered.	Not Answered		
Agree	Nobody should have to endure pain and suffering knowing that their life is coming to an end. It is important that people be allowed to make their own choices on how much pain, suffering and lack of bodily control they are willing to endure.	Not Answered		The only part I have concern with is the collecting and storing of medicines in own homes. I don't feel it is safe or sensible to have life ending medicines being collected by members of the public and kept in people's homes whether they consider it a secure place or not. Returning a medicine to a pharmacy is also dangerous. I think this area needs looking at in more detail. Perhaps this medicine should be delivered by a professional who then witnesses the person taking it before leaving?
Agree	It would give the individual control back over what is a terrifying thing to face with no escape. Allowing them to control their final steps in life gives them back that little piece of dignity they crave.	For over 5 years		
Agree	If I was terminally ill,I wouldn't want my family to suffer seeing me sick....I wouldn't want to be a burden on them. I think if my body is dead & everyone has to do things for me I wouldn't be happy. And the grieving process is dragged out for the family.	For over 1 year		
Agree	These people and their loved ones deserve the option, but with the physical and psychological support that any end of life person deserves.	For over 5 years	Avoiding "health tourism"	Consideration should be given to assisted suicide as well as assisted dying, especially in the case of long term, progressive disability patients. Support will need to be available for the loved ones of the person/patient.

Agree	Who would disagree with this?	Not Answered		We are ‘allowed’ to decide whether to bring life into the world; whether to have an abortion; whether to donate our organs; or whether to commit suicide.
	We are ‘allowed’ to decide whether to bring life into the world; whether to have an abortion; whether to donate our organs; or whether to commit suicide.			
	Our own bodies should be our own choice. In the instance of terminal illness, I believe it is absolutely inhumane to insist a person suffers right until the very bitter end. It’s cruel and unnecessary, and causes long lasting mental suffering for the families of those who died in such a way.			Our own bodies should be our own choice. In the instance of terminal illness, I believe it is absolutely inhumane to insist a person suffers right until the very bitter end. It’s cruel and unnecessary, and causes long lasting mental suffering for the families of those who died in such a way.
	We all should be 100% entitled to choose how we die.			We all should be 100% entitled to choose how we die.
Agree	I feel that an individual, whom has a terminal illness, or a disability which makes the quality of their life such that they are merely alive and not living, should have the choice in a safe, loving and secure environment to end their own life at a time that is right for them.	Not Answered		I believe that an individual should have the right to conscientiously choose to end their life if certain events occur, which are outside of their control, for instance traumatic brain injury, MND, auto immune encephalitis etc.
	I believe that extending a persons life through the assistance of medical intervention makes it harder on families as they watch the person fade into someone unrecognisable.			I believe that it should be an individuals right to state in a living will or advanced directive their right to chose should these devastating illnesses occur, this document would evidence the required consent and would have to be witnessed by a minimum of one practicing lawyer.
	I also feel that certain illnesses like MND or illnesses which cause traumatic brain injury of the sort which leave an individual requiring 24hr care, and which take away peoples dignity in the final stages is degrading, and not only upsetting, but also a terrifying prospect for the individual whom it is happening to, but also those who love them and are caring for them.			It should be noted that illnesses such as these affect an individuals ability to be able to obtain the life ending medication themselves, or obtain consent from medical practitioners at the point of requirement. Therefore I would request that this aspect be considered further.
Agree	Personal choice to end your life when you have the ability to do so to prevent prolonged suffering.	Not Answered		The right to die at home at a time of their choosing.
Agree		Not Answered		
Agree	Everybody with a terminal diagnosis or suffering from an incurable illness or living with severe pain/disability, whatever the cause, should have the right to choose to end their own life or be assisted in dying and not be forced into suicide or the journey to a Dignitas clinic.	For over 1 year		
Agree	People should not have to suffer ,animals don't	For over 5 years		No
Agree	I have watched too many people suffer with no hope of recovery. It's heart breaking watching someone starve to death in pain.	Not Answered	As long as it can be proved there is no way back to health.	People should prepare for this before it becomes essential. Talk to family members in advance. My children know I don't want to be left needing critical care. I am not old or sick but no one knows what is around the corner.
Agree		Not Answered		
Agree	If someone wants to end their life and suffering it’s their choice and should have nothing to do with the government or anyone else	Not Answered		
Not Sure	Whilst I agree people should be given the option of assisted dying, I'm not sure I could support it myself	For over 5 years		
Agree		For over 5 years		
Agree		For over 1 year		Not everyone can perform signing a document, my mother has a life changing stroke and has no use of her left side so can’t hold a pen. She can’t use her right either

Agree	If we can be mercyful to our pets why not ourselves and our loved ones. All for it	Not Answered		
Agree	Terminally ill people should have the right to reasonably choose how and when their life is to end.	Not Answered		
Agree	Everyone as a right to choose	Not Answered		
Agree	I believe a person has the right to decide for themselves, if the time comes that I am terminally ill I would like to go on my own terms I wouldn't want my family watching me suffer	For over 5 years		
Disagree	My view is based upon my ethics and understanding of the value of life, and, the role of 'society' i.e. the collective in supporting such an understood value. Such a proposed law will, in my opinion, undermine the value attached to life and our moral duty to protect it. No one should be denied palliative / end-of-life care, especially where pain relief is concerned but I do not believe that society is better served by this proposed legislation. Q10 below should not be relevant - there is no reason for anyone to face unbearable suffering. Pain relief should and is available and should be administered, even if the side effect is to shorten the life of the patient. Q 10 is a misleading issue in my opinion and is designed to undermine opposition to the proposed law. Subsequent questions e.g. 12, 13, 14 etc are therefore not relevant (as I oppose the proposal) I am also concerned that, in time, notwithstanding any initial drafted safeguards against it, medical staff may find that employment terms and 'opt-out' rights may change so as to require their participation against their ethical / moral views.	Not Answered		
Disagree	Having looked at jurisdictions that have assisted dying, I am concerned that over time people with terminal illness will face no other option but to choose assisted dying. There do not seem to be enough safeguards involved in protecting people's rights and people could be forced to make this choice because of a lack of funding in the NHS and lack of availability at Hospice. Support for Hospice could reduce and the 'majority rule' view of modern society could make people end their lives to benefit others. All life is precious and as we have seen in Dr Allinson's previous Bill, there is now no regard for life before birth.	For over 5 years		
Agree		For over 5 years		
Agree	I have seen family members die from Cancer, through dementia. I've had leukaemia myself.	Other	6 months	Only one doctor, not two.
Disagree	Already have palliative care	Other	Dont agree with assisted dying	Review if Dr not satisfied about capacity by psychiatrist with Appeal to Chair of Mental Health Review Tribunal. Dont agree with assisted dying
Agree	You Should Be Have The Right To Choose, If You Wish To Do So.	Not Answered		

Agree	People should be allowed to make a choice and be able to do that safely and effectively. Why should I have to endure a potentially difficult suicide when perfectly effective medical methods exist? I am 51 and w3 are the first generation to witness the horror that is for many the result of improvements in life expectancy. My mum has been in bed and silent with dementia for 4 years, I don't want that for me.	For over 1 year		I know now I do not want to live in a state I see many in nursing homes now. The legislation needs to permit advance decisions to be made and perhaps specify a next of kin who can request assistance once mental capacity is lost.
Agree	I have had 2 parents die of long term illnesses. Both expressed their pain and suffering and wish for it all to end long before if actually did end. I want that choice in my future. We invest so many funds in extending people's lives now with medical advances however we don't always consider the longer term effects in both the patient and their families	For over 1 year		I didn't say any comment regarding discussions with family. I do think it is important that family are on board with these types of decisions and that families are managed through this process.
Agree	Human being should have a choice ... presented by an unfavorable diagnosis .. if one is in mental or physical pain and their prognosis unlikely to improve give them a choice ... too many people are forced to take their own life in unfavorable circumstances or travel abroad to do so long before they need too .. in fear they won't be able bodied enough to do it later .. the anguish for them and their loved ones is unimaginable. Research papers shows in countries where euthanasia is permissible many of those with terminal illness don't take the euthanized way but are so relieved the option is there they pass peacefully before enacting the decision . Give folks the option .. no judgements...	Not Answered		Dying is the last part of living ... allow people dignity in death .. give them a choice euthanasia is a specialist field there are plenty of staff who will absolutely not want to part of it but plenty of kind people will willingly be present for those that do .. as an retired nurse I would willingly offer my presence
Agree	It's a civilised way of dealing with being terminally ill.	Not Answered		
Disagree	It would have a seriously detrimental effect on vulnerable people, including people who suffer from mental illness, people who are suicidal and people with physical disabilities. The risk of coercion is immense and well documented. The proposed safeguards to address these issues are flimsy at best. Palliative care, when done well is a far better option for the individual, for the families concerned and for society as a whole. We should be seeking to improve palliative care instead. ALL THE FOLLOWING QUESTIONS ARE BIASED AND ASSUME THAT THE RESPONDENT AGREES WITH THE PROPOSITION. I strongly disagree that assisted dying should be permitted, but if it is then the strongest possible restrictions should apply. QUESTION 9: I would want this limit to be materially lower than 6 months since it is impossible for doctors to have any certainty for such a lengthy prognosis.	For over 5 years	I strongly disagree that assisted dying should be permitted, but if it is then the strongest possible restrictions should apply	I am horrified by the biased nature of this "consultation". There is no mention of the implications it will have on vulnerable people and there seems to be no safeguards to protect them. The only safeguards are for those individuals considering ending their own lives. There are no safeguards for the wellbeing of professionals (doctors, nurses, pharmacists etc) who will be obliged to take part in this. There are no safeguards for people who are suicidal and may justifiably think that society now condones suicide. There are no safeguards for frail people who think they are being a burden on their families or society. The safeguards which are proposed are wholly inadequate for the issues which they are trying to address. In particular there should be strong policing and significant jail sentences for doctors who do not fully follow the safeguards that they are signing (e.g. assuring no coercion, certifying capacity, guaranteeing that the lifespan is under the legal limit etc)

Agree	I agree 100% that individuals with a terminal illness should have the choice as to how they end their life in a respectful and responsible manner	For over 1 year	My main comment is that those voting on this matter need to hear from those suffering every day in order to gain just a slight insight into the torment that some individuals have to live with. Only then might they have an understanding of the importance of providing a degree of dignity to those individuals by allowing them to access an assisted dying option. I have close friends who pray every day that they could be in control of their own destiny and be remembered for their strong, positive life rather than the months and years of physical and emotional turmoil.
Agree	Experience with 2 immediate family members and knowledge of other people in my circle with terminal illnesses. Why prolong their suffering for another few days or a week? Diseases such as MND - a truly terrible death. Often many are ready and want it over with. I will add our experience with Hospice and ICU has been excellent.	Not Answered	
Agree	I believe assisted dying should be a fundamental right.	Not Answered	
Agree	I met one person who went to Dignitas in Geneva in 2006 (Dr Anne Turner), and as a result have been a supporter of Dignity in Dying since. I find it highly objectionable for persons to object to allowing others to make choices about their own lives.	Not Answered	
Agree	We should allow those that are suffering due to a terminal illness, to end their lives with dignity.	For over 1 year	
Agree	Personal liberty to decide own fate when outcome is clear, and not be kept alive against one's will.	Not Answered	Get it done!

Disagree	<p>I am a resident on the Isle of Man and I believe that life is precious, and that this bill is intrinsically dangerous and unnecessary. If the bill is brought in to legislation, including with safeguards in place, it is evidenced in Canada that, the safeguards have been fairly quickly eroded and no longer exist. I also find it interesting that in Canada, where my brother and his family live, the process is now a case of " We can offer you palliative care, but we don't know when there will be a bed available, or where it will be able to be given, but we CAN offer you an injection which will bring about a quicker death." People are then making the decision to end their lives based on that premise that they will be a nuisance to their family and friends, which they don't want, or that their death will be potentially painful.</p> <p>Medical professionals here are concerned enough about the bill to have put forward their own reservations to me about it being enforced - what will happen if a medical professional chooses to 'opt out' of assisting the death of a person?</p> <p>The medical profession are bound by the Hippocratic oath on their registration which says "First do no harm".</p> <p>Surely it would be far more reasonable to give funding to palliative care, increasing budgets for hospices and nursing care teams.</p> <p>While the bill says that it will be for people to make their own decisions about assisted dying, who will decide at what point, someone is unable to make that decision for themselves? At what point, will the law be 'adjusted' to affect those who have mental health issues or who suffer with physical disabilities such as Downs Syndrome who are unable to make decisions?</p> <p>I find it incredible that Switzerland, the country where Dignitas operate, still sees the need to offer palliative care, when other countries, such as Australia, Belgium and the Netherlands and Canada, are offering assisted</p>	For over 5 years	PLEASE NOTE - These questions are skewed towards the bill being passed. There is no room to comment if you intrinsically disagree with the questions being asked.	<p>I am shocked by this 'consultation' as it is very cleared biased towards the bill being passed. How can I answer the questions with my own opinions?, eg if I disagree with the person storing medication till they want to take it, the following question asks if the medication should be returned to a pharmacy straightaway.... If I disagree with a person having the medication in their home, how can I reply to that question in a relevant way given that the answers are directed with 3 options, but no room for comment?</p> <p>It is very clear of the purpose of this 'consultation' - it is limited in its potential for honest answers, because there is no place to write my own responses to each question.</p> <p>I think 14 days cooling off period is far too short .</p> <p>I am concerned about the process for measuring 'mental capacity ' to make an informed choice</p> <p>I am concerned that the safeguards put in place will be quickly eroded as has happened around the world - why do we need this law in the first place?</p>
Agree	<p>I have long believed that humans should be able to make an informed choice in respect of end of life.</p>	Not Answered		<p>I strongly support assisted dying as a choice in end of life care. I do wonder whether people should be able to collect medicine from a pharmacy themselves and take it at home when they decide, which some of the questions here seem to suggest. I think a medical professional should be involved to administer the medicine and to be with the patient/family until death occurs. I really think assisted dying can and will make a big difference to end of life care options and negates the need to travel abroad at an already difficult time.</p>
Agree		Other	3 months minimum, but there should be some flexibility for unlucky peopl diagnosed as soon as they arrive.	<p>None of the health care people - drs, nurses etc should be friends or relatives of the patient.</p>
Agree	<p>It is up to the individual to decide, given all the facts etc., not politicians p</p>	Other	At least two years	<p>If the person has signed a wish while of a sound mind that wish should be accepted if it be to terminate his or her life giving the reasons e.g. dementia or physical breakdown.</p>
Agree	<p>Respect for patient autonomy and relief of suffering</p>	Not Answered		
Agree	<p>I feel that when it is a given that a person is suffering and has come to the point of not being able to have a basic quality of life they should be able to take the decision to end their own life should they so wish , without fear of legal repercussions against those loved ones left behind.</p>	For over 5 years		

Agree	100%. Every person should have the right to choose how they wish to end their life in such circumstances. Making people needlessly suffer is barbaric. No person or organisation should have rule over anothers.	Not Answered	
Agree	It is inhumane to force people to live in pain when there is no chance of recovery	For over 5 years	The living will option is important for those who may wish to take up this process in the event of illness/injury that prevents them from signing the written declaration consent paperwork prior to carrying out there final wish regarding life.
Agree	The death of my Mother at 85 in hospital last year gave me first-hand real life experience of these issues. I felt very deeply her anger and frustration at being unable to end her own life once she knew, from medical staff, that she wouldn't survive her illness. Her requests to us, her children, to gather up and give her enough medication to save her the prospect of a drawn-out end, and her anguish (as well as our own) at being told we couldn't help her, were heart-breaking. We all knew she would have to endure, something she had always planned not to do as she was a highly intelligent woman who placed enormous value on independence and autonomy. Having kept dogs all my life, it seems incongruous still that I can help them by calling upon a vet to alleviate end-of-life suffering, but when my Mother, of entirely sound mind, was so desperate for similar help and able actually to voice her wishes, I was powerless to do anything but sit and hold her hand.	Not Answered	
Not Sure	Death is pretty final. I am 72 and am far from flippant about how to live you life to the end. Our medicines and ethics make dying more difficult when at end of life. I can accept assisted death is an opportunity to accept the inevitable and reduce suffering but it will need a sensitivity that few of us are capable of - there will be few people prepared to go there with the terminally ill. My concern is the legislation proposed to protect the dying will make the decision making too difficult for those needing care and for whom death needs to be made simple. Assisted dying is too complicated for all the right reasons - much as the decision to switch off a ventilator - so much as I would like the option I am still undecided.	For over 1 year	The island must have sufficient doctors informed and trained to offer support for this and they should be part of a panel who support each other and others involved in care. I think there needs to be a religious element to this although it needs to be optional.
Agree	People CAN end their life as it is, but it is illegal. If someone does not want to face the pain, distress etc. of dying slowly, why should we add more distress by making it illegal. Why should people who help face criminal charges for providing assitance to people who have clearly made a rational devision. Life expectancy is not the point, pain and discomfort levels are!	Other	Provided their diagnosis was made whilst they are resident.
Agree	Everybody should decide about themselves.	Not Answered	
Agree	I have a terminal diagnosis and would wish to end my life should I progress to a stage where I was suffering extreme pain of low quality of life.	For over 1 year	
Agree	If choice over bodily function is a human right for termination of pregnancies, and gender reassignment it must be a choice of dignity in death.	Not Answered	People with motor neurone diseases such as ALS should be permitted to have assisted dying by family member or physician if they are no longer capable of self administering.

Agree		Not Answered	Assisted dying provision would enable terminally ill people (who chose to use it) the freedom to live their lives fully without the worry of their inevitable death being a long and painful process which they cannot control. Personally if I were one day to be diagnosed with dementia it would give me immense comfort to know that I would not have to become a skeletal incontinent shell of my former self and my family would not have to see me this way as I would most definitely use the assisted dying provision.
Agree	We do the same for our pets, letting the pass when they are suffering and so we should do the same with adults if we believe in love	For over 5 years	I think this has been well designed and thought out, I think it should go to a referendum to be added before the final bill be given a reading and if a majority support it then it should go ahead as stated here.
Agree	It seems fair to let people have this choice as long as they are fully aware of other options, help and also aware of the consequences.	For over 5 years	
Agree	Watched my Father die a slow and painful death with one male nurse on ward 8 bursting his pic line through not flushing it first and then another line could not be inserted due to a bank holiday weekend. 5 days he would have had to wait ! We received an apology from hospital but it's easy being sorry after death... disgusting that a nurse couldn't do a simple procedure and if that's what happens I'd rather die quicker with assisted suicide thanks	For over 1 year	Wouldn't let an animal suffer so why a human ??????
Agree		For over 1 year	Thank you for bringing this to public consultation.
Agree	I am strongly in support of permitting assisted dying. I have held this view for most of my life but my views have become much stronger after watching a relative suffer an unpleasant death. I really want this choice for myself should I become unwell in the future.	Not Answered	I think it's important that assisted dying is not limited to just those with cancer. I hope the legislation will ensure all conditions that cause suffering are covered.
Disagree	I think we have a great lcare system for "terminally ill" people on this island. Also as a believer in scriptural writings I think it is wrong to take or assist in the taking of life.	Not Answered	Dr Allinson should concentrate on his job of running the treasury instead of getting involved with this issue. Apart from that, he is a doctor of medicine. As such he should protect life!
Agree	I think that is inhumane that people should be kept alive who are suffering severe pain. Many people like Brian Rix who was President of Mencap for many years was vehemently opposed to assisted dying all his life until he himself was dying and then he admitted that he was wrong and assisted dying should be made legal.	Not Answered	It would be helpful if the government look how other governments who have who have passed legislation regarding assisted dying have drafted their bills to see what has been included and what has not
Agree	Who decided cancer had the right to kill people slowly and agonisingly. Someone with a terminal illness must have the choice for a dignified death if they wish.	For over 1 year	
Agree	The ability to end their own life with the suffering, pain, ignominy and humiliation of debilitating wasting illnesses should be self-autonomous	For over 1 year	

Agree	Mentally capable people should have the choice to end their lives if they have a terminal illness.	For over 1 year	If a person is physically incapable of signing the consent (effects of MND etc), a family member should be able to sign the form PROVIDED 2 medical professionals agree the patient is mentally capable of making such a decision. This could be achieved using a living will or advanced directive but some illnesses progress more quickly than others.
Agree	Being some one that is living with a long term progressive condition, I understand that I too may reach the point when my pain and condition it too much for me to go on, and that I will need assistance to end the suffering and to relive the anguish of those around me.	Other 1 year or have direct links to the Island, such as born here	
Agree	<p>For too long our Island has been subject to so called religious belief. We hadbeen made aware that a number of people who attended a Requisition Meeting at Baldrine Church Hall, Monday 15th August, 2022, have voiced complaints about the meeting. Some of these on social media have cast our island in a poor light. We have not bothered complaining regarding the issue as we felt that no one would be interested. However in the hope that someone might be interested we would like to add our names and be counted as being utterly dissatisfied and disgusted with the arrogance and conduct of our MHK, Andrew Smith.</p> <p>We had to endure 27 minutes of Smith reading from a prepared script regarding how much he has done for the community, all the research he has carried out in respect of assisted dying from worldwide sources and basically what a hardworking researcher and fine and upstanding fellow he is. I noted the time he began and finished speaking.</p> <p>The packed audience was clearly well attended by his fellow christian zealots.</p> <p>He stated that only one person had spoken to him about the issue of assisted dying who was identified as being a female in Onchan. This was whilst canvasing and also from all the people he speaks to at all the events, meetings, local social interactions in the shops etc. He was challenged by a nurse from Laxey who was clearly incensed by this claim explaining that she had challenged him in depth when he called at her house. He claimed that he had visited 98% of Garff households during his electioneering. I do recall that an electioneering flyer came through our door whilst I was</p>	Not Answered	<p>There are any number of problems with the 2 doctors rule, not least the lack of ability and will from the IOM Government to provide staffing, given the atrocious accommodation costs and pay of health workers. We have some great staff here but they are faced with utter incompetence of elected officials. Manx Care is a total joke. See the press reports of the shenanigans of senior workers and government officials and tribunals that have resulted in Doctors successfully suing their employer i.e. the Government.</p>
Agree	You wouldn't allow an animal to suffer. My body my choice.	For over 1 year	<p>Due to some illnesses making dexterity difficult to sign anything. It should surely be about mental capacity first and foremost. I believe that in this case the patient should have legal representation.</p>
Agree	People should have the right to choose to end their life	Not Answered	

Disagree	I believe in the sanctity of life. I am a born again Christian and I believe God gives life and He is the only one who decides when that life comes to and end . It's not for men to decide.	Other	I don't agree with assisted dying	I strongly object to assisted dying. Every human being's death is only given and known by God who created every human being on earth. These processes also violate the healthcare professionals' belief in God. All Christian healthcare professionals would not be involved in such processes as they have a right to exercise their faith. So where is the line going to be drawn.
Agree	Everyone deserves to the right to live their life how they choose, this includes ending their life. There are many reasons assisted dying should be introduced including; quality of life, terminal illness, chronic untreatable pain, assisted dying allows people to die with dignity.	Not Answered		
Agree	Everyone deserves the option to die with dignity and without suffering. We wouldn't prolong the death of an animal the way we do humans	Not Answered		
Agree	I've been with an elderly person who was in considerable pain, knew she was dying, and was begging me to help her end her life. Almost completely blind (through macular degeneration), very 'hard-of-hearing' (aka 80% deaf), unable to move on her own (due to a stroke) she was consigned to spend the last 18 months of her life just sitting in a chair (which she regularly soiled due to incontinence) looking at a wall. In a care home (where there were too few carers) she was generally unaware of anyone else being in the room with her, she had to be hand-fed either by one of the carers - or by visiting family: that was no way for a proud elderly lady to be 'kept alive' simply because the people who make the laws are too afraid to grasp the nettle, when all she wanted was to die and put all the pain of living like that behind her.	Not Answered		There should be a totally independent "Crown officer" who can be called in by relatives or close friends specially to witness the person expressing the wish to end their life. He/she can - along with the two medical doctors who are there to ascertain whether the person is truly desirous of ending their life prematurely - later be called upon to confirm that the wish to be assisted in terminating their own life was genuinely expressed by the 'patient'. However, unless the patient is themselves quite incapable of expressing their own wish to be so assisted by a medical clinician, a 'very close' relation (e.g. wife or husband) may request this officer to also attend the consultation - by the two doctors - to certify that it was in the patient's own best interest not to prolong their life if there was no prospect of any improvement. The Crown officer may also be able to override 'an unreasonable objection' by someone to a patient's expressed wish to be assisted to terminate their own life, and certify to the Coroner that the act of assistance was properly considered and lawfully executed.
Agree	I would not wish anyone to suffer unnecessarily when afflicted by a terminal illness such as Cancer or to suffer a remorseless decline to inevitable death with such as Motor Neurone disease, being left mentally alert but a mere shell of a person. We do not allow pets or other animals to suffer unnecessarily so why should mentally competent adults have to do so.	For over 1 year		I oppose the requirement to have to sign a written request unless it has an exemption where a person is physically unable to sign due to the nature of their illness or physical disability for example advanced Motor Neurone, advanced Parkinsons disease or being a quadriplegic. Perhaps instead a fingerprint applied in front of witnesses to ensure there is no coercion applied.
Disagree	I know I would feel guilty for not ending my life if my illness has become a burden. I am sure many feels the same if assisted dying is legal and available.	Not Answered		
Agree	Self determination should be a persons' right. People have a right to choose how they live their lives, so they should also be permitted how to choose their death too.	Not Answered		The person may not have the ability to write or sign their own name due to the nature of their condition, so in this situation perhaps a video or oral consent could be taken.

Agree	We have been able to put animals out of their suffering for many years. In fact to leave an animal suffering with no hope of recovery is actually considered neglect and abuse, but humans we can leave to die painful traumatic deaths with no dignity and the individual has no control over their fate	For over 5 years		A living will stipulating a persons wishes if they were to be affected by Alzheimer's which would make them mentally incompetent to make the decision later should be devised that a person can state that at a certain point they wish an assisted dying to be commenced, for example, if I were to contract Alzheimer's and can no longer recognise my family I wish to be allowed to die with dignity
Agree	I believe someone who is terminally ill should have control over their end of life care and death	Not Answered		
Agree		For over 5 years		
Agree	personal choice to end life on your terms	Other	should be no limit	Should be extended to those who are not terminally ill. Anyone who wishes to end their life should have the option to do so.
Disagree	No one chose to be born and therefore to end life should not be a choice either. As medical profession and palliative care are improved assisted dying should not be a matter that should be legislated. There are things in life that are beyond us and we are not here to fix every issue of life.	Not Answered		
Agree	Many people are now living a long time with (for example) a cancer diagnosis. This itself takes a lot of strength and courage. It is only right and fair that a terminally ill person should be able to concentrate their efforts on enjoying the time they have left rather than fretting over how terrible their final days may be, particularly when such suffering is completely avoidable. It seems inhumane, barbaric even to make people endure an end wrapped in pain, having lost all dignity.	Not Answered		Q9, unsure about the life expectancy, this may add too much pressure on doctors. A timescale doesn't take into account individual needs and abilities to cope with illness.
Agree	You don't let an animal die in pain why would you let someone you love?	For over 1 year		

Agree	I think assisted dying could be an important option for those diagnosed with a terminal illness alongside other options (i.e., palliative care etc). It sounds like people would be given an informed choice and the ability to choose what they feel is the right decision for them in their individual circumstances. It sounds like safeguarding procedures would be in place to support its implementation and determine mental capacity, for example. However, this is evidently a complex matter that needs rigorous consideration and I can understand the views both for and against.	Other	Maybe around 2/3 years	I suppose the specifics of the assisted dying bill are difficult/complex, so that is why I have put 'not sure' for some responses. I would probably have to educate myself more on the specifics before committing to a yes/no. Question 23. "Should this be able to be stored securely in the person's home until they decide whether they want to take it or not?" - My main reason for answering not sure was around the safety of having the medication in the house where someone else may be able to access to it. For example, if children or other adults it was not intended for accidentally or intentionally ingested them. However, if there was a suitable way to ensure that access is secure and not accessible by others then perhaps this would be okay. Question 25. "Should a health care professional be required to be with the patient once they have taken the medication until they are certified to have died?" I suppose if there was not a healthcare professional and if with question 23 a person had access to the medication in their home, it would allow someone to take them at a time that they feel suits them best. However, I suppose having a healthcare professional at hand might be comforting to some people. A healthcare professional may also be able to monitor, and record reactions to the medication and procedures etc and provide data to inform/revise future policies.
Agree		Other	I'd say the person should be able to prove permanent residency, although a time frame may be unhelpful.	
Disagree	Good end of life care is the most important, killing people is not the answer	Other	It is wrong and this survey is biased and does not allow people to answer in this manner	Where is the fourth response this is loaded to push assisted dying. Where is the response for I disagree with this proposal?
Agree		Other	If the Isle of Man is bold enough to adopt this approach, residents of neighbouring countries should be able to take advantage of it.	

Agree	<p>I think that an individual has the right to choose if they wish to end their life. I think it is an important right we should all be afforded should we wish should we be facing a terminal condition or something where quality of life is at a minimum level and causing suffering both physically and mentally to occur.</p> <p>I have personally had friends or family members who have said when very unwell they wish they could end things . Some with terminal cancer who were in a lot of pain and discomfort for example.</p> <p>I also work as a care worker. I am involved in end of life care at times and I do what I can within my role to make a client more comfortable and meet their needs as expected, but I would like to see choice for assisted dying be something they are also given and have a say in should they choose.</p> <p>It is a difficult topic and upsetting for many, but with the correct protocols in place and correct decision making process it would give control over how someone spends their time towards the end . It is important not just for the person but their friends, family and loved ones as well.</p>	For over 1 year	<p>I think in a modern society we should have the right to choose. No one should have to suffer. Giving control to the individual is very important. Person centered care, what they wish and how it will be achieved and when. I think a human being deserves that choice.</p>
Agree	<p>Having watched a loved one die very slowly, it seems to me that their wish to accelerate the process and choose when to die was completely ignored.</p>	For over 1 year	<p>It is also appropriate that folks who have become old and frail should be able to choose when to end their lives.</p> <p>Many old people are simply existing in care homes and the like with conditions which severely limit their quality of life.</p> <p>By way of example, medical research into conditions of the eye, like Glaucoma, has been neglected. Thus an older person's life can be prolonged through life sustaining drugs to treat heart conditions, for example, but their eyesight, hearing and mobility gradually fades away leaving them isolated. In such instances, despite not having a terminal condition, the individual should also be free to choose a planned, dignified end to their life.</p>
Agree	<p>I witnessed first hand the terrible and prolonged illness with cancer of my mother and only wished this was available on the island.</p>	Not Answered	No
Agree	<p>Freedom of choice</p>	For over 1 year	Question 24 assumes questions 22 & 23 answers are yes
Agree	<p>People should have the right, when still sound of mind, to end their own pain and suffering</p>	Not Answered	<p>I believe it should be with a medical professional present and not given by a pharmacy to the patient or relative as this medication could be misused in the case of mental health in a relative or someone else who may have access to the home.</p> <p>Assisted dying absolutely must and will inevitably become an option , there has been debate for many years and this should be the point at which govt acts upon the wishes of people and makes it lawful for assisted dying to be available on the Isle of Man</p>
Agree	<p>People who are extremely unwell and are dying or are unwell or disabled and experience pain should not have to endure humiliation and suffering needlessly</p>	Not Answered	
Agree	<p>No body should suffer in pain indefinitely. We don't let animals suffer so why do we let humans.</p>	Not Answered	

Agree	Medical science is now able to delay end of life, which can often result in suffering from multiple health problems. It is time to redress the balance by allowing individuals to choose to shorten their terminal suffering.	For over 1 year	
Agree	I watched my husband die from parkinsons and dementia which was a very slow and awful death and I would not want to put my family through an experience like that.	Not Answered	
Agree	I do not see why people are allowed to suffer until the end when animals do not!!	Not Answered	I have answered 'not sure' to some of the questions as reasons for assisted dying because each case is individual. Age and timing shouldn't determine assisted dying. However, if someone is in terrible pain and is terminal they should be allowed to terminate their life with dignity instead of dying in an agonised undignified way. We should be afforded the same rights as animals and not be allowed to suffer when there is no hope of recovery.
Agree	After working in a nursing home and sitting with numerous people at the end of their life and caring for them before that time I've seen levels of suffering that no one should ever experience, I strongly believe everyone should have the right to a dignified pain free life and sometimes that means choosing to die	Not Answered	
Agree		Not Answered	
Agree		Not Answered	I am strongly in favour and think that the considerations being consulted upon are very sensible. This will rely heavily on the capacity legislation, only part 1 of, which is currently in the branches of Tynwald. It is of utmost importance that strong capacity legislation (and code of practice) is in place before this Bill is implemented.
Agree	There seems little point to forcing people to live a life of both emotional agony and physical pain when it is clear medically that there is no hope of recovery. Critical to this though is the diagnosis of their illness, which really needs a carefully and ethically designed process.	Not Answered	
Agree	To put it simply, if an animal is in extreme pain or has a terminal illness they are allowed to die with dignity instead of having to suffer further. Indeed, an owner would be prosecuted for causing unnecessary suffering. It should be no different with a human. If they have had enough, they too should be allowed to choose when it is their time to go	For over 1 year	
Agree	It should be everyone's Right to decide their own fate	For over 1 year	
Agree	control over ones own life should be considered	Not Answered	
Agree	I feel an adult of sound mind with a terminal illness should have the choice of when they die.	For over 5 years	
Agree	Everyone should have the right to end their own life if they have a terminal illness	Not Answered	

Agree	Why should we force terminally I'll people to end there days in pain and distress. If your pets are in pain. It's acceptable to end their suffering. Why am we not be has humane to our terminally ill . Just because we can keep some one alive doesn't make it the right think to do.	Other	2-3 years 1 is too short 5 is too long	People have self determination throughout there life. Why should we not have self determination in our own death. Parents should be able in conjunction with doctors. Be able to make the decision for under 18. Medical science has progressed to a level. People can be kept alive. We need to start asking is this in the best interest of the patient. If the best and most humane. Medical procedure is to end the patient life. Then that has to be an option.
Agree	In my nursing career, I have watched many people in their last days, weeks and months of life. These people in the main had no specific illness other than old age. The path to old age is long and hard. Think of the last time you had flu or a cold. That is how old age is every day. Those aches and pains you may experience once in a while, not only remain but get worse every day in the older person with many finding it difficult to perform the normal every day tasks of life such as washing, dressing and feeding. How humiliating to have to ask someone to take you to the toilet or worse to be incontinent and have someone clean you up. Ultimately, most are bed bound or confined to their one small room for their last weeks or months. Most said that they had had enough of this life or said they were ready for the end. Only 2 people specifically asked if there was anything they could have to hasten their end. THERE WAS NOT. If there had, probably more would have asked for it. Like most of my generation, I hope that option is available when I reach that point.	Not Answered		One of the most important issues that have not been addressed is that of a person with advanced dementia. They would be unable to make a request for assisted dying or take the medication themselves. There should be a carefully constructed process whereby a previously written living will, including a granted power of attorney (usually a family member, close friend or possibly a trusted health or legal professional) is observed along with all the other safeguards.
Agree	No one should have to suffer needless pain when there is not going to be a good outcome. It is undignified, and completely unnecessary and cruel	Not Answered		

Agree	Having witnessed my late Mother wither away over a period of Years with Parkinson's and DLB despite her wish when she was diagnosed and compos mentis that she would dearly be allowed to die with dignity, she was left to wither away and became distressed whenever I came near her because she did not recognise me and thought I was going to harm her. This not only destroyed her but my sister and me. Eventually after being unable to eat or drink she died a horrible death. What made this even worse was the fact that she was a nurse her whole life and was the matron of the Corrin Home in Peel for many years and having witnessed first hand the terrible suffering of some of her patients she on more than one occasion pleaded with me not to let her suffer the same fate. There was a number of times while I watched her painful demise that I was greatly tempted to put a pillow over her face and end her suffering but each time I thought she would not want me to spend years in Prison. It has been a painful experience even writing this response just recalling the hideous and demeaning end to my loving Mother and hope the Island adopts the provision for assisted dying so other Families in the future do not have to go through similar trauma. Thank you for giving me the opportunity to share my sad story.	Not Answered		
Agree	Everyone should have a choice over their own body and how they soend their final days/weeks. We should not be forced to suffer right to the end if we do not wish too	For over 5 years		
Agree	If the individual decides and has gone through any safeguards then it should be their choice.	Not Answered		
	If my own quality of life deteriorated to such an extent that I was living in constant pain or a burden on family and friends I would like the choice			
Agree	I 100% agree! Why wouldn't you allow for someone that has a terminal illness to make this decision and have their dignity kept. Our family had to watch our poor Grandpa pass away from cancer, getting weaker & weaker by the day - horrendous for all to go through - for both the patient and their families! Why allow that to happen? They are human, its heartbreaking to see & to still carry them awful memories.	For over 5 years		I really do hope this gets passed, to help families through these awful times the best that they can. To watch someone die from a terminal illness, knowing they are not even half of their former selves is horrific. I strongly believe that this should be administrated by a medical profession & that the drug should not be at a persons home, if the person decides they want to stay home to pass away with dignity & comfort, the medical profession will have to go to their house with the drug.
Agree	I fully support the introduction of voluntary euthanasia in the Isle of Man. Having witnessed the dreadful, painful, undignified and prolonged death of my father I would not wish to suffer the same.	Not Answered		I object to the proposed requirement for the person to sign. It may be that they are too weak or have lost that capability due to the illness. A living will or verbal/video consent should be accepted.
Disagree	They have the right to die when they think its their time and when the soul leaves the body. That doesn't mean, they can choose themselves when they would like to pass away. That will be murder or an act of suicide but in an passive manner.	Other	They don't have to be permanent residents. This should be universal.	
Agree	If they are suffering why should they carry on the way they are! If it means ending their pain and unbearable suffering then it should be legal and have no questions asked	Not Answered		

Agree	I think competent adults should have the freedom and dignity to decide their own end of life path.	Not Answered	
Agree	Fear of incapacity has a terrible effect on mental health, whether the option of assisted dying is used or not, its availability can greatly reduce anxiety of dependency and indignity.	Not Answered	
Agree	No one should have to suffer from prolonged pain or lack of dignity in their last days.	Not Answered	
Agree		For over 1 year	
Agree	The autonomy of the subject should be paramount and they should be allowed to make the choice to die with dignity. Although I see the bill as a step in the right direction, I would like to see the ability to make advanced decisions regarding medical treatment and assisted dying and for a registered medical practitioner to implement the wishes of a subject to die in circumstances where that person is incapable of administering such treatment themselves and they still have capacity to give consent or they have made an advanced decision.	Not Answered	
Agree	No one should have to live in pain and wait to die with no quality of life, also no family should be forced to watch a loved one suffer when there is no alternative to end of life care.	For over 1 year	
Agree	It is the choice of the individual if they wish to continue to suffer or not. No government, religion or law has the moral right to take the choice away from an individual. If that individual is not capable to do it themselves then the person who assists them at their request should not be culpable for fulfilling the wishes of someone of sound mind.	Not Answered	It needs to be a supervised procedure but someone who has taken the Hippocratic oath should not be the one to administer the drug. The procedure should occur either at home for residents if they so wish or at a medical facility for non residents.
Agree	Totally agree with assisted dying for terminally ill adults. I also think that everyone should have the choice of where they die and the manner of their death. I have seen far too many people linger in this world, in pain, struggling, basically in some cases taking years to die slowly and painfully. I have also heard many express the wish that they could take their own life.	Other	Over 10 years. The IOM should not become an industry or euthanasia tourist paradise.
Agree		Not Answered	
Agree		For over 1 year	
Agree	I feel very strongly it is my decision to make, not that of someone opposed to my views. It shouldn't even be a debate - those who are against assisted dying do not have to take up the option of using it. It is barbaric to let people suffer in pain until they die.	For over 5 years	It will need to make provision for circumstances where the person may be paraplegic or quadriplegic - ie they may have full mental capacity but can physically sign or are not capable of self administering. Some answers have been not sure as I am not familiar with the proposed drugs or the effect these have on the patient before death, but ultimately very strongly supportive of this bill

Agree	<p>I believe that the route of assisted dying should be made available for anyone of sound mind whose quality of life has irreversibly deteriorated to the point that they are unnecessarily suffering with no scope for reprieve. This service would allow such a person to end their life and/or suffering in a comfortable and dignified manner at a time of their choosing.</p> <p>The current lack of such a provision potentially forces people to endure a miserable existence against their will, or to take drastic action to end things on their own terms.</p> <p>Legalising assisted dying would encourage conversation around this taboo subject. Being able to discuss in the presence of medical professionals would help both the patient and their loved ones come to terms with the inevitable and provide some certainty in an otherwise uncertain situation.</p>	Not Answered	
Agree	There are many situations that arise where a person should have the choice of whether or not they could terminate their life. Having seen people dying of cancer, I know the pain and indignity that comes with the end of their life. Whilst there are so many wonderful services that do all they can to assist, it should be that a person could choose not to be in pain anymore and make the decision about when they want to go on their terms. I would want to have that option	For over 5 years	There are obviously an awful lot of safeguards which need to be put in place to ensure the system is not abused. I do not believe that healthy people would be allowed to choose to die and it should be something which allows those who have life limiting conditions such as MND, those with terminal cancer plus any other diseases which will cause significant pain (and ultimately death) with no other medications available to them, to be able to use. Giving people the option is better than having nothing at all available
Agree	We are in an age where medical technologies and interventions provide the best capabilities to enable people to effectively decide the best options for them; it's time to empower the individual and support the wishes of those who choose the right to die	For over 1 year	
Agree	Individuals should be allowed control of their own affairs in an 'end of life' situation. it is unfair to prolong the life of someone who is suffering, or is going to suffer, the increasing affects of a degenerative /debilitating illness.	For over 1 year	A formal timeframe should be in place to ensure that an individual is given the chance to progress a request for 'Assisted Dying' within a set period, and not kept alive for a prolonged period at the behest of a third party.
Agree	Anyone of sound mind should be able to make their own decisions over their own health care and that includes how they choose to die.	For over 1 year	<p>I think that younger people should also have the ability to request this but the rules may need to be a little stronger to ensure they are fit to make the decision.</p> <p>Provision needs to be made for those that can't sign the documentation but are still able to make the decision.</p>
Agree	<p>Strongly agree.</p> <p>All individuals who are facing death, be it in a month or a year or more should have the option to end Thier own suffering</p>	For over 5 years	

Agree	I would support assisted dying after watching both parents die of terminal cancer. In addition my father in law is now wheel chair bound and suffering from such a debilitating condition that he can do absolutely nothing for himself and in effect is "trapped" in a useless body. This is not a kind way to face death. It is not a good death. His suffering, frustration and absolute despair is clear to understand, even though his ability to speak is also limited to just occasional words. We have no real idea how long this situation will continue.	Not Answered		
Agree	We should have the choice to decide for our self's if we do not want to suffer any more pain	Not Answered		If for any reason the person can not answer for themself the children should be able to express what the patient would like to happen if they can not talk .My children know I would not like to be kept in bed in a vegetated coma being fed through a drip
Not Sure	Whilst I think each person has a right to choose - even if the choice is suicide, I'm concerned about having adequate safeguards in place to ensure there is no undue influence to push any person down this route. I'm also concerned that although this bill is about assisted dying for the terminally ill it opens a door to possible future legislation giving this route to people who are not terminally ill. My particular concern is for people with mental health issues. My experience is that it's difficult to get help from the mental health services at the time it's most needed - people could choose to die when with appropriate support they could return to being fully functioning.	For over 5 years		I think the medication should not be available for use at home. After the 14 days from signing the declaration, if the person wants to go ahead with the suicide, they should be admitted to a specialised care facility.
Agree	If I can pay tax, drive, drink and smoke then I can choose when I want to die. I dont want to be ill and have to rely on others to feed and wash me. It's not living, its existing	Not Answered		
Agree		For over 5 years		
Agree	I believe where the guidelines are correct, someone of sound mind should be able to make the decision they would like to die. I think we all know our boundaries and how we want to die. I personally don't want to die not myself - not a version of me that is unrecognisable.	Other	I believe it should be over 5 years or a justifiable tie to the island that gives them claim to want to die here	I think there does need to be something that is talks about family wishes and not being able to change the decision IF the person is found competent.
Agree		For over 1 year		

Agree	I am aged 79 and have had to cope with the deaths of my parents and my wife’s parents, and several friends and relatives. With palliative and or hospice end of life care most of these people passed away peacefully and without undue distress. However, my mother in law in particular and one friend in particular had unpleasant deaths due to cancer, becoming emaciated and distressed for some days before their inevitable death. How much kinder it would have been had these two unfortunates had been ‘put to sleep’ a week before they died. At my age I am conscious that my own death can not be that far off and would not wish to be kept alive in misery pain and distress until the bitter end. I have been able to extend this end of life kindness to several pet dogs and cats over the years enabling the to pass painlessly and cannot understand why the same facility is not on offer to suffering humans.	Not Answered		
Agree	I believe that an individual should have the right to choose how they die. If they are terminal then they should have the right to decide to end their life while they are still able to make that choice. I know that I would not want my loved ones to see me deteriorate if I was terminally ill.	Not Answered		I believe this is something the Isle of Man should have in place and protected for it's citizens.
Agree	Prolongation of suffering is inhumane	Not Answered		
Agree	Every individual has the right to determine their own life. If that involves a decision to end that life, then that is their decision, and certainly nothing to do with any other individual stopping or interfering in that decision. .	For over 1 year		
Agree	People should have more say in their end of life pathway	Other	Non-residents could access the service but have to cover all costs	If someone is given a diagnosis of a terminal illness and told they have a certain period of time to live, assisted dying should be an option for them. They shouldn't have to wait until they only have 6 months to live.
Agree	Having worked as a nurse for 30 plus years i have been witness to many dying patients and it has not always been a respectful dignified death due to our current law stating that we can't allow individuals to decide that they no longer wish to live, often this involves living with pain, mental and physical distress and the need for strong medication to control symptoms. Throughout our lives we have to make decisions about our needs and choices and we are expected to do this, however the decision regarding ending our life is the most important decision anyone can make about themselves and basically this is the one decision we are given no authority over. Choosing to end life should totally be the decision of that individual, it is their life and their body and nobody else has the right to say otherwise and providing they have capacity then this should totally be their decision.	Not Answered		
Disagree	I can see how the change in law has impacted other countries such as Canada, it imposes a huge amount of pressure on vulnerable groups in society such as the elderly, people with mental health issues and disabilities. This decision would be the thin end of the wedge, the laws were once tight in Canada but now is open to anyone over the age of 18 with decision making capacity.	For over 5 years		I think this is terrifying and a reflection of the state the world is in. Palliative care is the answer, ‘care’ being what will be lacking if ‘assisted dying’ becomes accepted. Pain relief can be given, I was with my dad at the end and he was given enough pain relief to pass gently away. The thin end of the wedge.

Agree	Where there is no hope of recovery and the individual concerned has endured prolonged discomfort and distress, no quality of life and is in more than significant discomfort, these are grounds for a considered and valid plea for assisted dying.	For over 1 year	
Agree	My Grandad recently died a painful and horrible death. It was painful because the nurses couldn't legally give him any more pain relief than what he was on. He was a good man and no one deserves to die in such a horrific way. He always told us he would never let himself get that sick he was commit suicide first, but because of the laws over here he died in an undignified painful way.	Not Answered	
Agree	I think we need to move away from the historic idea that suicide is a crime. Why are we able to put an animal out of it's suffering but a human can't be offered the same rights?	Not Answered	<p>I think that parents should be able to choose this for their non verbal children who are never going survive and are suspected of being in pain. I believe that both parents would have to be in agreement and they should be have to be assessed for their capacity too. This includes children over the age of 18.</p> <p>I don't think that you should have to wait until you are in the last 6 months of life. If you have received a diagnosis of a fatal disease you should be allowed to choose to end your life whenever you like.</p> <p>A family member should also be able to administer the medication in the presence of a doctor / healthcare professional if that is the wish of the dying person and they are unable to administer it themselves, and the family member agrees.</p>
Agree	I believe that individuals should be given the choice for their end of life decisions, especially when the other option could involve prolonged pain and suffering	Not Answered	<p>Most of our system is built on self referrals, we refer ourselves to the GP and if they are unable to assist or are not knowledgeable on the subject they will escalate the referral to the specialist that does. There are already numerous issues with this system, as many studies show GP's are not making those further escalations and taking action themselves in areas they are not trained or knowledgeable in, which has huge repercussions for the patients.</p> <p>I would urge that this "two doctor" requirement being pushed is reviewed and autonomy of the decision is given directly to the patient. If not then, at no point should just any doctor be used to review a patients needs, but only those specialising in end of life care.</p>
Agree	As an individual I should have control over my own values and interests. I have personal experience of family members and a friend who have died through terminal illness. No one should suffer in pain and should have autonomy over themself.	Not Answered	

Agree	Having watched my mother lie immobile in a nursing home bed and beg for someone to give her something so she could join her husband, I have absolutely no doubt that assisted dying should be allowed. If an animal was kept alive in the way that some people are, the owner would be prosecuted for cruelty and yet it is seen as acceptable for a human being.	For over 1 year		
Agree	Having seen my Father in Law go through the final process of living with Cancer and the suffering he went through I am compelled to ask that assisted dying is thoroughly debated so that people in a terminally ill situation may have the choice of how to end their life. It is not an easy decision and several clauses need to be in place to ensure the act of assisted dying is only granted to those in the latter stages of a terminal illness.I think the choice needs to be discussed and agreed with doctors and close family but the patient should have the final say in how they wish to die.	Not Answered		I believe the person who is terminally ill or in uncontrollable long term pain and suffering should have the choice to have an assisted death to ease their pain and suffering.Having witnessed family and friends suffer in the final throes of cancer it is absolutely heartbreaking knowing that the final outcome will be the same but they could be saved from the horrible and traumatic end to their life if there was a process to help end their suffering early. I sincerely hope that this matter is thoroughly debated and peoples opinions are considered in the final decision.
Agree		For over 5 years		
Agree	First hand experience of watching numerous loved ones suffer.	Not Answered		
Agree	I am fully in favour of introducing legislation to allow assisted dying. I would like to enable those who are terminally to be able to end their life with the minimum of suffering for both the individual and their families.	For over 1 year		No
Disagree	No one should be assisted to take their lives, assisting a person in killing themselves is not different from being a murderer.	Other	Whether they are residents or not, they should NOT be assisted to die	This survey is biased, it does not give possibility to just be against this bill. Whoever composed this survey and whoever approved this survey to be published were NOT IMPARTIAL. THIS WAS A WAIST OF OUR TIME. In the Isle of Man many people actually have some wisdom, this was not a good reflection of the people of the Isle Of Man. People are already asking for it, and suffering greatly in the meantime. With the appropriate safeguarding and training for staff, this should not pose any risk to any vulnerable adults. The evidence collected from other jurisdictions speaks for itself.
Agree	It's an entirely individual decision, and we should be allowed to treat ourselves with the simplest of dignities that we would treat our pets with. I work in healthcare and the amount of patients that outright ask to die, or terminally ill patients who cannot get into hospice and have to die on the wards with less support, privacy and end of life medications is getting higher from my experience.	For over 1 year		
Agree	My father refused more treatment for his terminal cancer, and essentially starved to death. In my view this is barbaric in this day and age. The nurses were brilliant and kept his pain under control, but that's not the point. I do not want to go like that when my time comes. I would like to say I want to go now, and have my family with me when I go. Not the long protracted, not knowing for weeks how long its going to be and how much I may suffer. I want that choice and I'd really like to know why that choice is still being denied to people? Answer to question no 9 No!	Not Answered		The reason I've replied not sure is because I think this needs to become a normal part of our life choices and imposition of strict timings, seems nonsensical to me. However I can see that initially some clear structure probably needs to be in place. Just get on and legalise dignity in dying, please. Withholding this option from suffering people is barbaric and thank you Dr Allinson for bringing it forward as a Public Members bill

Agree	We don't let animals suffer so why should people not be given the same dignity	For over 5 years	
Agree	I think it's pretty obvious why and you only have to use common sense as to why people including myself agree to this. It is disgusting to make people suffer to the end. Especially if they have a voice and are very clear about what they want. People with a terminal illness want to die with dignity and peacefully. There's nothing peaceful about pain and losing every function you have before you die when you're suffering to the very end. You're trapped in a body that's failed you and it's excruciating. Nobody should be made to go through that if that's not what they want. We don't give a second thought to put down animals that don't even have a voice or say in the matter. We treat animals better in this regard than our own human beings. It's so backwards. It's time for change. Long past time tbh.	For over 1 year	In regards to giving written consent, there needs to be provisions for those who aren't able to write due to their illness. Video recorded consent should be an option for all as it's clear and definitive that it's the said person giving their consent and making their wishes known.
Agree	I consider myself to be a well educated and well informed person. I would like the choice, should I be terminally ill, in order to avoid undue suffering and to avoid an unnecessary burden on health services. In addition, for my children to avoid the unnecessary distress of a long, drawn out terminal illness. Having seen a grandparent have a long drawn out terminal illness I would hate for anyone to go through that.	For over 5 years	
Agree	<p>It provides control and dignity to all those involved. If an animal got to the condition some humans suffer but were forced to be kept alive, we would be done for animal abuse.</p> <p>I would prefer to have an option than cost my family and the state unnecessary costs and care which could be used elsewhere.</p> <p>It would take a burden off the state and allow the likes of hospice to provide additional care to those who might make a recovery or aren't in as much pain.</p> <p>I would hate to think a family member would be punished for assisting me to die if I was in that much pain but couldn't do it myself.</p>	For over 5 years	I believe that while a person should be able to administer the medicine themselves, it should be provided to them directly in their chosen setting and be there to confirm correct consumption and the time of death.
Agree	Some states of 'being alive' are literally worse than death. People should have the choice.	Not Answered	It should be available to all, not just terminal diagnoses. If sound mind, I would like the choice. If I develop dementia or other mental incapacity, I should be able to (in advance) nominate someone to make the decision for me. None of us want to be kept alive artificially if there is no hope of recovery and zero quality of life.

Agree	<p>Assisted dying should be legalised in the Isle of Man as it gives those who are dying from terminal illness a way to escape the pain, agony and stress of dying. They themselves can chose when they should die and that is the least we can do to honour them... seeing as my grandma had suffered with Terminal Cancer for 8 months and my grandad currently going through palliative care he himself expressing wishes of dying sooner rather than later, I know had assisted dying been legal neither would have had to suffer (or suffering) as long as they have done.</p> <p>We as a society pride ourselves on saying human life is the most precious life on earth... so why is it that when a dog/cat/bird or any animal is in pain and suffering we give them the grace of death to be free from that... yet as humans we persist with forcing people to stay alive with tubes left, right and centre, drips and cannulas in.</p>	Not Answered	<p>The number of doctors should be 3 rather than 2. With 2 there is a potential stalemate scenario when one says yes and the other says no making the ultimate decision much harder for the patient. At least if there is a unanimous decision from health care professionals this will further relieve the burden of the process.</p>
Agree	People should have a right to choose how and when they die.	Other 3years	<p>The person should be able to nominate someone in their living will, e.g. a spouse, to proceed with the assisted dying process, should their mental capacity deteriorate and they no longer are regarded as having sufficient, nor will they have the capacity until their natural death.</p>
Agree	We don't let dogs suffer so why let people who can ask for it and tell you how much pain. It should be a case of my body, my choice.	Not Answered	<p>Standard of life is very important and should be considered. But on the flip side need to ensure it is done for real reasons and not because they don't want to be a burden on others. Review needs to be done on a case by case basis and not a one size fits all solution</p>
Agree	I feel all people should be able to die with dignity at a time of their choosing if they are terminally l'll or become completely paralyzed and totally dependent on care. Our pets are afforded this option for goodness sake!	For over 1 year	<p>I think setting an age limit of 18 before you can access assisted dying is too old. I'm not sure what age limit should be set, perhaps 16..... I also think if someone is in a accident which results in them being in a vegetative state and they have not made a living will stating they would want to access assisted dying, the family should have the right to decide - with safeguards in place of course.</p>
Agree Agree Agree	We extend humane deaths on animals to end suffering but must possibly endure of the most inhumane deaths imaginable . This is not right.	Not Answered For over 5 years For over 1 year	<p>I watched my father die , his death was painful and prolonged for months. Ultimately drowning in liquid as it filled his lungs. No one should have to endure a death like that. It is inhumane . I loved my father but would have supported him if he had the choice to end his life .</p>
Agree	If a person is terminally ill and they want to end their life rather than go through any amount of suffering then they should have that option. Everybody should be entitled to a peaceful, pain free and dignified death.	Not Answered	
Agree	There would be less suffering for the individuals concerned and those who love them.	For over 1 year	
Agree		Not Answered	

Agree	Having lost my mother and brother to Moror Neurone disease and seen the suffering they endured I would like to have the option of assisteddying should I become terminally ill.	Not Answered	
Agree	Assisted dying is a personal choice and I would like to have the choice if I am ever in a situation where living is not a life anymore but just hooked up to machines and medicine to make you comfortable.	Not Answered	
Agree	Absolutely agree. Everyone should have a right to pass with dignity, at a time of their choosing. I was 15 when I watched my sister die of cancer. She was in an induced coma for the last 2 weeks of her life, however 'she' left us long before her physical body died yet my family had to watch and play the waiting game all the same. In the eight years since then, I have seen numerous other relatives die (also of cancer) in an even less dignified, more traumatic fashion. We wouldn't allow our pets to suffer needlessly, therefore there should be no reason to watch our own family suffer in their final days. I certainly would not want my family to see me in such pain, and vice versa.	Not Answered	
Agree	Dignity and choice at end of life and other scenarios is a pre requisite in a modern society which is not tainted by religious and moral crusaders.	For over 5 years	With regards to q19, consideration needs to be given for consent where a person is unable to sign a document. Generally, I do not believe the proposals go far enough in that they need to cater for those who have degenerative conditions, Alzheimer’s type conditions and for those whose condition renders quality of life to be poor.
Agree	I believe that any person should have the ultimate say in whether they choose to 'live in suffering' or go for an assisted end of life procedure. Its their life and they should choose.	Not Answered	
Agree		Not Answered	
Agree	If I were in a position that I was an emotional and financial burden on my family through ill health, I would wish to be able to choose between living and dying.	Not Answered	
Agree	It's cruel to make people suffer and die slowly when we have the option to ease suffering. If I ever get to that stage I would like to be in control of my own death and keep my dignity.	For over 1 year	
Agree		Not Answered	
Agree	Give people a chance to die in dignity. Having no standard of living is not living at all.	For over 5 years	
Agree	‘Waiting to die’ has to be the worst symptom of a terminal illness. Knowing you are not going to get better, and having to go through pain and illness despite no promise to ever getting better, must be awful.	Not Answered	
Agree		Not Answered	
Agree		For over 5 years	


Agree	In case of a progressive and incurable disease (supported by medical evidence and following medical advice), assisted dying should be permitted as compatible to human rights	For over 5 years		
Disagree		Not Answered		The questions in this consultation are flawed - if you are against Assisted Suicide / Euthanasia then it's not clear when you are asking questions about the processes and procedures of something you don't agree with in the first place.
Agree	My sister had Motor Neurone disease and ended up not being able to speak or feed herself which to her was no life. She tried to go to Switzerland to end her life but she was too late and unable to travel. To suffer like she did was horrendous. In the end she refused to eat and drink. She died a week later.	Not Answered		This has dragged on too long. A decision has to be made very soon and not overruled by a change of MHK.
Agree	It's the humane thing to do.	Not Answered		
Agree	It's about time people had the control, I went through an experience recently which made me think I would want the choice. So I could end life on my terms and not put myself and my family though unnecessary physical and emotional pain.	For over 1 year		
Agree	Watch someone die with no dignity, suffering a long painful death and you would want assisted dying. It's barbaric and I wouldn't treat an animal that way so why should we allow it to happen to humans.	Not Answered		When people are in pain and are going to die soon you just let them die in dignity
Agree	Nobody should have to suffer needlessly	For over 1 year		
Disagree	In my life, I have seen so many well-meant laws and safeguards fail. Some the worst cases was mass euthanasia in Germany 1933 - 1945. Furthermore, even in "normal" times, there has always been a considerable number of doctors and/or consultants and/or nurses who were absolutely criminal and killed patients, above all babies or OAPs, for "fun" to satisfy their queer/sick desires and phantasies (e.g. Harold Shipman, Daniel Urbani, Michael Swango). No criminal laws nor any "watchdog" authority prevented this evil. Sometimes, even the "watchdog" is corrupt, e.g. the present Independent Office for police Conduct ("IOPC") in the UK. Just recently, the director of the IOPC Mr Michael Lockwood himself was forced to resign or get sacked with immediate effect cos he was involved in criminal activities and investigations. If even the stalwart-type of safeguards fail so often and so dramatically, how could an IOM law about "Assisted Dying" prevent crimes, misuse, abuse, and corrupted decisions? I say it cannot. So, I do not trust any state-directed or controlled or monitored activities to kill people ("Assisted Dying") or to help them kill themselves ("Assisted Suicide"). So, never trust a state cos their representatives and their ideologies might change, often to the worse. My respect for life and the living includes dying. Dying is just the other side	Other	no assisted dying for anybody!	Assisted Ding is an idea / policy of the so-called progressive left ("woke", "wokeria"). I totally reject this idea because its imminently implied DANGER of being misused. When you look at history, such stories always stated small and "innocent" and then turned into some big evil.

Agree	Quite simply it is a humane policy for our population. If I were to allow my animals to suffer I could face prison, whereas I am expected to either suffer myself, or watch my loved ones suffer under current legislation.	Not Answered		
Agree	Anyone who is terminally ill and suffering should be given the right to die peacefully when they want to	For over 1 year		
Agree	It is cruel to keep a human alive with full mental capacity but physically unable to move and in constant pain and leave them waiting to die with no chance of improvement.	For over 5 years		
Agree	Everyone who is told they have a terminal disease should be given the opportunity to decide when they should go It could be someone who is given a 12 month sentence knowing that in those 12 months they will lose all functionality and whilst they won't know it their family will endure tremendous heartache and pain There will always be those that don't want to go clinging to a tiny hope they will be cured and those people can continue with that hope but I think the majority will want to sort things out and say goodbye and die with dignity A friend of mine was in Hopsice for several weeks and the morphine pump made her very sleepy in fact she slept for 9 days before she finally left the world - the family were waiting for those 9 days cause they didn't want her to die alone. Palliative care is top notch here on the Island but the pain and suffering of that ladies family could easily have been reduced by a good number of days and I know they would have been grateful for that.	Other	I am unclear as to whether the IOM aid wanting to be another Switzerland and I am not sure that we should be that am not sure we should allow companies like Dignitas in	<p>Your question around relatives collecting the prescription is an odd one</p> <p>As I had to collect a prescription pack from MEDs and take to chemist for my Mum</p> <p>She was a resident at Elder Grange at the time and they didn't have staff to collect it and so I did - purely to alleviated my Mums suffering - however I was somewhat surprised that the chemist advised the rest of the pharmacy that there would be a delay whilst he prepared the end of life pack</p> <p>not all family members would have coped with that trauma and to be fair I am not sure many would want that to be their responsibility</p>
Agree	After working in the corrin home and seeing the elderly who are terminally I'll pleading for end is heartbreaking	For over 5 years		
Agree	Having watched my Dad pass away from terminal lung cancer, I am fully supportive of an assisted dying bill. People should be afforded dignity in life and in death.	For over 5 years		<p>This is an incredibly emotive topic however I feel with careful consideration, laws and clear direction in place it could help ease the suffering of many people and their families. I have made it clear to my family what I would like in the event of a terminal illness or life changing deliberating condition however at present there is nothing they could do to assist me in my wishes in the event of such an outcome. Let's be clear this isn't about murdering people or killing people before their time, it's about people being able to decide for themselves how and when they end their own life.</p>
Agree	I watched both my parents die in pain. To enable people to have a peaceful, dignified end to their lives we must have the courage to accept that human life ends as does that of any animal. This is about preventing suffering and giving people a measure of control over their own deaths. We, rightly, would not allow another animal to suffer so we must now extend that courtesy to ourselves and our loved ones.	Not Answered		<p>Please have the courage to do this. It is an incredibly difficult decision that very few people would take lightly but it is about care, love and respect for the person who is suffering.</p>
Agree	An animal wouldn't suffer - there are laws to ensure this doesn't happen. Having watched 2 people suffer until death with cancer why shouldn't a human be afforded the same courtesy. Am image of a person begging for death stays with the family for ever.	For over 5 years		

Agree	The patient should be able to choose their time of passing. It's beyond cruel for someone to go through a protracted death if they close not to go through the pain or just the inevitability of dying	Not Answered	
Agree	Individuals should be able to make an informed choice	Not Answered	
Agree	Everyone deserves to die with dignity, if they have a terminal illness that does not provide them with quality of life, we should have the grace to let them die on their own terms	Not Answered	
Agree	I have watched 2 grandparents and my father die from cancer and would hate for my family to endure the same. My grandfather's passing in particular was horrific it took days for his body to finally give in and he was in a lot of pain. I would rather have a choice that I, or if I were unable, my family could assist in my dying if it meant for a more peaceful death.	Not Answered	There are so many variables in how, when and why assisted dying may be considered. A living will I feel, would help determine an individual's wishes should they be unable to request for help themselves.
Agree	If someone is either terminally ill or in such severe pain that they wish to end their suffering but cannot do so themselves then assisted dying should be available for them to choose. They can then say their goodbyes & die peacefully rather than slowly & painfully.	For over 5 years	
Agree	Having watched my mother die slowly with little dignity and no quality of life I am adamant that in future I might be able to prevent my own children from having to watch me do the same.	Not Answered	
Agree	People should be able to choose for themselves the time they feel is right for them to die. How can any other person know how someone feels.	For over 1 year	It is important that people have the right to decide the time of their own death as they are the only ones who know how they are suffering. No one has the right to tell a person that they are not suffering enough or that because they may survive for longer than a time proscribed by law that they must continue with a life that is unbearable to them. Every option should be talked through but the individual must be the person who decides the time and place of their death.
Agree		For over 1 year	To include alternative provision for those who retain mental capacity but not physical capacity to sign the agreement eg. MND patients
Agree	A person should be allowed to die with dignity at a time & place of their choosing, not forced to die slowly & in pain or have to travel to another country.	For over 5 years	
Agree	We all have to die at some point and it seems wrong to make someone suffer unnecessarily at the end of their life, against their will.	For over 1 year	Understand that the bill is being considered to address the specific problem of there not being an option for people to control when their life ends, when they've got a terminal illness/. Obviously people who are suffering mentally may recover, but if they are stuck in a pattern of frequent relapses, it could be argued that they are having to bear a v high level of suffering. They're often desperate to end their life, but there is no choice for them. Do understand that this is a v difficult area though.
Agree		For over 1 year	

Not Sure	Personal and professional experience	For over 5 years	<p>In my experience not difficult to get 2 doctors to agree especially when power influence or money involved.</p> <p>Many people still hold medical practitioners in awe unfair power balance.</p> <p>Older people worrying about being a burden, limited social support or ongoing care costs could be influenced.</p> <p>Consultants are now younger may not appreciate quality of life judgements for older people.</p> <p>Still misunderstanding of palliative care. Fear around it being end of p he care rather than symptom control to enhance life.</p> <p>Poor provision of 24 hour care and support makes families and carers limit their options.</p> <p>Many people express a strong opinion to end life in periods of acute mental or physical pain. E.g. Women in labour, post trauma,life changing injury, extreme grief. This is real at the time but passes with the right support.</p> <p>Improve health and social care first. Give people the confidence to widen options.</p> <p>Avoid death tourism at all costs.</p>
Agree	To die with dignity. We don't let animals suffer when they are terminal	Other 2-3 years	I feel it should follow the same arrangements and rules as the Swiss clinics
Agree	I believe people in that situation should have the right to choose. In my career I have cared for people who are caught in a situation where they have had enough of the pain, seeing their relatives suffering, having to witness their nearest and dearest suffering.	Other	I think the IOM has a chance to lead the way, and part of that, I believe is to make it available to anyone who feels it is right for them, as long as they meet the criteria
Agree	Personal experience	Not Answered	<p>What happens if an individual is unable to physically sign the declaration.</p> <p>What would be shown on a death certificate?</p> <p>7 or 14 days may be a long period if someone rapidly declines. It's difficult to watch over a loved one who has suddenly declined whilst receiving palliative care.</p>
Agree	I think people should be able to die with dignity and be able to choose when they die if the are terminally	For over 1 year	
Agree	No-one should suffer pain	For over 1 year	

Agree	The human right to life should be backed up by the choice to die	Not Answered		The right to life is guaranteed to humans, as the right to a quick and dignified death should be. At a time when most countries still don't allow this on their own soil, we should not restrict its practice to Manx residents only. It is an important service that thousands of people from all over the world can benefit from. We should help pioneer this.
Agree	No one should suffer when there is no medical possibility of recovery and quality of life is removed	For over 5 years		If an individual chooses Assisted dying this should not impact the next of kin receiving any death benefits that would have become due if the person died of natural causes.
Agree	I work with people that are end of life. The distress this can cause to the patient, family and friends dealing with news can take it's toll. I believe that people should be allowed how and when they die to allow them a dignified passing. Sometimes medication can impair their final days/weeks and that does not allow them 'quality' time with loved ones. With all the medical advances, if that person has no chance of a recovery, then why would we let people suffer? we wouldn't let a pet suffer. A lot of clients have told me that they wish they could die - they're tired and fed up with medical intervention and just want to be at peace.	For over 5 years	People may only come over here to get assisted dying.	I hope this Bill is passed and precautions, recommended, are followed. I think that the medication should only be held by medical professionals until the patient declares it time. Meds left in the house may lead to miss use or incorrect administration.
Agree	It is inhumane to allow people to suffer pain and indignity Individuals should be allowed to determine how and when their life ends We do not allow animals to suffer yet many people suffer agonising and slow deaths Medical intervention would allow patients to plan (with their loved ones) when they pass away Currently terminally ill people must travel to Switzerland to pass away on their own terms This adds to the pain and suffering	Not Answered		This matter should be dealt with swiftly to end needless suffering
Agree	I have lost both my parents, one to cancer and one with dementia. It is extremely difficult watching a parent being kept alive seeing them suffer and not being able to help. My mum had dementia and she said for years she didn't want to end up in a nursing home and how she would rather be dead She would ask us over the years not to let her go into a nursing home. I also wouldn't want to go into a nursing home, having someone else wiping my bum for me, and just waiting to die is not fair.	For over 1 year		
Agree		For over 5 years		
Agree	People should not have to endure unbelievable pain or discomfort while waiting to die	For over 5 years		

	Agree	Definitely the individual should be given the option and fully supported at a time they deem 'right' for them		Not Answered		I think assisted dying should be completely up to the individual when they have been made fully aware of their options, ie treatments, palliative care support networks. I think a group of specialist practitioners, maybe as part of the Hospice team, should be the ones to help facilitate the process and give the support and information and assurances to the patient and family. Some people may wish to be at home, some may prefer to be in a medical environment to give them peace of mind that there would be someone to immediately support the family in attendance afterward.
	Agree			Not Answered		
	Agree	As a person with a terminal cancer diagnosis, I would hope that when the pain becomes too much for me, I can choose to end it.		For over 5 years		Surely, as a race, we can work out a plan for assisted dying., The argument that we wouldn't let an animal suffer, might be not quite the same but it is humane that we would let loved ones die terrible painful deaths but know that it is morally right to have put dogs put down ? 
	Agree			Not Answered		As someone who is terminally ill, I would be able to enjoy my remaining time, knowing that I don't have to suffer at the end ... as it is, the fear of terrible pain, an awful death for me and for my family to go through, haunts me every day ! The fear of what will happen to me in the end, is like a millstone round my neck. Please sort it out !
	Agree			Not Answered		
	Agree			Not Answered		I have had a few of my dogs and cats put to sleep at the end of their lives. This has always been a peaceful process. they were given a strong sedative before the final injection. They simply closed their eyes and stopped breathing. This should be possible for us as well. To be given a final injection when we are not conscious any more. Maybe this could be performed by a mechanism, so no health care worker or relative would need to be directly involved.
	Disagree	On moral, legal and religious grounds it is wrong for anyone to take or assist in taking a life.		Other	These questions are not worded or giving an option for those against assisted dying. The survey writers appear to have already made their minds up and are positioning the criteria around which it should be permitted.	There would need to be consideration given to the brand and reputation of the Isle of Man which already seems to be a haven for gambling and cannabis companies and individuals who cheat the UK taxpayer out of millions in fake PPE contracts. Do we really want to be a destination for suicide tourists. The island should focus on its strengths in moral sectors which have served us well for decades such as farming fisheries, finance and the TT races. The island should distance itself from questionable people and practices.
	Agree	I watched a loved one suffer terribly and heard them actually ask a nurse to give them too much pain relief so they could go. They suffered for another six weeks.		Other	Many island residents have loved family members in the UK and elsewhere. Also everyone should be able to decide when it is time to die as they feel the pain is too much	

Agree	I have given palliative care to many people in 20years, and its awful to watch them slowly and sometimes painfully die, they can't eat, hardly drink move position and have no quality of life what so ever. They are lying there waiting for thier bodies to give up and die. Which can last a very long time.	Not Answered	If people want to complete a signed legal document while still healthy and of sound mind flr the future saying I would like to die, when/if they become seriously ill, have no quality of life and are suffering daily, they should be allowed ! It's very similar to acquiring a DNACPR.
	And the below questions all depend on the circumstances.		
Agree	Having nursed both my mother and father at the end of life an easier and more composed death would I think made that time better for everyone.	Not Answered	
Agree	I think everyone should have the option to die with dignity, and if there is terminal illness involved, people should have the right to end their life before they suffer even more	Not Answered	
Agree	People who are of sound mind should have the right to be able to choose if they want to end their life.	Not Answered	
Agree	I believe everyone capable of deciding their own fate if terminally should be allowed to do so.	For over 5 years	
Agree	My body,my choice	Not Answered	
Agree		For over 5 years	
Agree	Have always thought that people should be able to decide when and how they might want to end their life.	For over 1 year	I think people should definitely be allowed to include an advance directive or living will regarding both assisted dying along with resuscitation directives. However there should also be a clause to say that these wishes are to be adhered to unequivocally by all professionals. Long over due why should I have to suffer ,my family,my friends when their is a terminal prognosis's or one of debilitating illness the person concerned should be allowed to pass away at their time and place
	In my view not limited to a terminal illness but also when they are incapable of looking after themselves.		
Agree		Not Answered	

Disagree	<p>This is a very dangerous proposal. Like many other pieces of legislation (eg on abortion) there are safeguards proposed here, but it is very likely these will be amended away in due course as they were with abortion legislation and as they have been in various other jurisdictions that introduced assisted dying legislation with safeguards.</p> <p>In addition, as a practising Christian it is my firm belief that the only person who has the right to take life is God.</p> <p>Further, I do not accept the distinction made between assisted dying and assisted suicide, this is a highly artificial division, and one which is designed to blur this issue, someone taking heir own life with he assistance of someone else, is still that person committing suicide.</p> <p>Finally, I am very concerned for Doctors and pharmacists who may not agree with assisted dying but who have to refer someone to another practitioner for it to occur. Such Doctors and pharmacists are being put in a very difficult situation.</p> <p>I proposed to make a more detailed written submission in due course.</p> <p>Given my opposition to the whole concept, the remaining questions are largely irrelevant and apart from questions 10,11 I have not answered them.</p>	Not Answered		I have no further comments to make, this Bill is to be opposed at every stage.
Agree	<p>If there’s no hope for you and you are in pain. you should be allowed to end your life</p>	For over 1 year		
Agree	<p>Pain, emotional distress of not just yourself but your loved ones is an important consideration.</p> <p>When you are dying you will have everything explained, what to expect for the time you have left, how long, the care you will need the quality of life and how quickly things may deteriorate. Depending on the cause this can look very different for different people. It should be down to that individual to decide if having that extra time is going to cause suffering unnecessarily considering the only way to stop suffering is to die, people should absolutely be able to decide to pass away via assisted dying</p>	Not Answered		<p>How long will the assessment take? starting from making the appointment to discuss assisted dying (what wait time will their be to actually get that first discussion started) through to seeing the two doctors and the possibility of a psychiatrists involvement.</p> <p>If it is like most processes within the hospital I would imagine this would take considerable time. If at the end of this why should someone have to have a wait period? If the process was done in a day then yes a short wait period would be sensible. Please consider how long the process will take before this is decided.</p>
Agree	<p>If the patient has been given a terminal diagnosis, then it should be up the that person to decide ,ie if in pain , too painful for family or no standard of life</p>	Other	Diagnosis must be after they take up residency	

Agree	Nobody should have to suffer a long and often painful end to their life, and everyone should have this choice.	Not Answered		This is dependent on the person having sufficient mental capacity to make the decision, discuss with a dr and also take the medication required. In my opinion , whilst a positive option this does not go far enough. My Mother is currently kept alive through medication (she is type 1 diabetic) in a residential nursing home, and for the past 2- 3 years she has been unable to feed herself, unable to walk or move about, is 100% reliant on the nursing staff to feed, move, wash, change her nappy etc. In the past 12-18 months she does not recognise any of her family and whilst I fully appreciate that the medical care team have a role to keep her alive it is degrading for her and upsetting to watch - I have no idea if she is in pain, but guess she is, and remembering her like this is not comfortable. Hers, and many others situations fall outside of these recommendation and should be taken into consideration as she is not the only person in this horrible situation. I believe family members, along with a dr should be able to make this decision on the persons behalf - similar to the process for a DNR authority.
Disagree	Very slippery slope! Modern medicine means people shouldn't be in pain and don't need to end their lives. assisted dying out awful pressure on families to make horrible decisions	Other	I don't agree with assisted death so this is not relevant	I've not answered most questions as I don't agree with assisted dying at all in any capacity
Agree	I can see no reason to prolong suffering and believe it reinforces the independence of the individual to make a choice about their own treatment.	For over 5 years		From personal experience my concern is that the bill does nothing to alleviate the suffering of dementia patients and their relatives, even though the individual might have strongly supported assisted dying while compos mentis.
Agree	To allow the same dignity and compassion we give our pets	Not Answered		People have to be able to end their life if they want to without having to travel to the likes of Switzerland. They often need to do this while they are still able to travel and therefore sometimes end up having an earlier death than they would have chosen if they could have chosen the time and the place themselves.
Agree	Unless there is a definable reason to believe that an individuals capability to make sound decisions is impaired then everyone should have the right to make a decision about their lives which includes when they die.	Not Answered		

Agree	People don't have the option. We are here to care for our dying once given a terminal diagnosis. If the terminal diagnosis is going to give someone such a poor quality of life even with the best care in the world is a poor end to their life why can't they have the option to choose? Why can't they make these decisions when they have capacity? If it's clear, instructions are clear it should be law. We don't let our animals suffer why should we let our humans suffer? Some diseases which aren't currently fully curable such as dementia is prolonged and has longer and more devastating effect on the people left behind. Nobody wants to end their life like that as a vegetable for so many years, not knowing who your family is, and taking all their savings with it so they struggle to pay their own bills when you as a person aren't there anymore. That's not fair for anyone, and that is not the reason I save money for. I want to know my kids will have financial stability when I go. Why are we also paying out all this money keep people alive that don't want to be alive through serious illness health. It also has more of a devastating effect on the family's mental health having to deal with longer term upset rather than losing someone quicker and be able to let the suffering rest. The key is informed decision making with people who have capacity.	Not Answered	
Agree	I feel that to prevent suffering a person of sound mind should be able to make the decision to end their own life.	Not Answered	
Agree		Not Answered	
Agree	Unnecessary suffering is inhumane and if death is the only way to end it then a mentally competent person should be able to choose that option either at the time or in advance if they want they want to make a decision before losing mental capacity	Not Answered	It is important that anyone making this decision has all the information they need to make an informed decision and that they are not being in any way coerced or doing it for a sense of guilt or being a burden. Counseling may be useful to allow someone to voice their thoughts and feelings without fear of being judged and to allow them to discuss the options available without having to commit to a course of action. It's also very important for people to know that they can change their mind at any time even at the very last minute.
Agree	Everyone deserves to have control over their life and end of life with dignity.	Not Answered	
Agree	I don't think I know anyone that wants to suffer in later life. My grandma passed last year after a battle with Dementia and it was one of the worst things I've had to witness. My partner lost a grandparent to MND which again is just an abhorrent disease that nobody should have to suffer through unwillingly.	For over 1 year	
	I don't know anyone that wants to lose all their dignity, be unable to wash and clean themselves, be unable to take themselves to the bathroom. There's no value in that life.		
	Medicine has gone to far in keeping people who would have died with some dignity alive for far too long.		
Agree	Dignity at the end of life along with a choice of when enough is enough for both yourself, friends and family.	For over 5 years	

Agree		Not Answered	Concerns about dangerous medication being transferred to and from a pharmacy, should be administered and store by a medical professional.
Agree	To alleviate suffering, I wouldn't allow my dog to suffer when there is a way to help, we can at least do the same for humans.	Not Answered	You ask if you agree that two doctors should individually see the person, I don't agree with this but subsequent questions assume that I have agreed which will give skewed analysis . Two medical people yes but one could be a senior nurse with the doctor being the second person to see the individual.
	I don't agree that it should only be allowed if the end is in sight, some conditions make life unbearable.		I think that we should most definitely offer this to people from off island, the stress of needing to travel to Switzerland for example, would be much alleviated by the shorter journey if people are from the UK. It would also alleviate the stress on accompanying relatives as they would be in an environment which would be much easier for them to deal with afterwards in terms of language, familiar type of environment and shorter journey home, it would also avoid the problem of people trying to meet any residency time periods which would put dreadful strain on families.
Agree		For over 5 years	
Disagree	The palliative care available now is sufficient to make terminally ill people comfortable and there is no need to assist them to die. Two of my family died of cancer and they received exemplary care in hospice including pain relief. I understand that the opiate pain relievers may depress the central nervous system and this can contribute to a somewhat earlier death but I have no problem with that as long as the person is comfortable and any side effects are dealt with.e.g. Hallucinations,nausea.	For over 5 years	There should be an extremely narrow band of circumstances in which assisted dying should be allowed to be considered. My fear is abuse by relatives who may not want to pay care costs or who are under pressure from lack of support with looking after dying relatives.Also,terminal people may feel they are a burden and want to sacrifice themselves to free their relatives of the burden of care. Permission should be on a case by case basis and also the government should show the public research they have done leading up to this point that shows how it works in the countries that allow this to happen.
Agree	This is about our choice and our own bodies. I have personally seen far too many precious people be forced to live long painful undignified lives before eventually passing away in pain.	Not Answered	Personally I don't feel that this is a route I would take myself but we all deserve the choice to end our own suffering.
Agree	Witnessed my mother have to go into a nursing home in her 50s from a similar disorder to ALS. She slowly wasted away over a number of years with little quality of life until she could not move or talk. I feel if she had had the choice she would have chosen to end her life. If the same condition happens to me I would choose to end my life before I became too poorly to spend my days in a nursing home with no quality of life.	Not Answered	Please give us the choice!
Agree		Not Answered	
Agree	I feel that assisted dying should be permitted on the Isle of Man when that person has no chance of living a life without pain or suffering. Also when they are facing a terminal illness with no hope of recovery. Also when they are being treated on life support and unable to sustain life themselves.	Not Answered	This hasn't covered people who are brain damaged and have paralysis caused by accidents who have no chance of recovery. Who are in constant pain and often on life support. These patients often have no communication. This Bill does not seem to have covered their needs.
Disagree	It might be used incorrectly	For over 5 years	I believe in God's will forever one and hospital to helped with pain as this will be open to abuse if it is passed

Agree	So that those who are suffering have a choice whether they would like to live or not	Not Answered	
Agree	No one should have to suffer longer then they have to at the end of life with out a choice	For over 5 years	I don't think anybody should suffer in the last days or weeks of life, no one would let an animal suffer but why let it happen to a human
Agree	I am a care worker and look after people who do, and do not, get over illnesses. I would like to have the option to limit how much suffering I was submitted to, in the event that I became that ill.	For over 5 years	It is hard enough to get an appointment with a doctor, they shouldn't be the cause of any delay for the person. They shouldn't be concientiously objecting because they are not the one suffering, or knowing that they will be suffering. I don't think a health professional should stay with them while they take the medication, if it's in their home, they can take it any time. It could be distressing for the professional, because it's what the person wants, not what the professional wants.
Agree		For over 5 years	Any form of oral or other assisted dying drugs should not be given to individuals to collect from a pharmacy, these can get into the wrong hands.
Agree	I agree, provided this is the wish of the patient who does not want to continue a life of suffering, dependence, indignity, and being a cause of distress to loved ones.	Not Answered	
Agree	It is a humane option.	For over 1 year	
Agree	I believe a mentally competent person, who is going to undergo a painful and debilitating end to their life should be supported to terminate their life. They have the right to make that choice.	Not Answered	
Agree	People should have a choice	For over 5 years	Anyone should be able to make that choice if they are over 18
Agree	I have witness 2 members of my family die from terminal diseases. I know, that if assisted dying had have been an option, they would've done it. It allows someone in an awful situation, completely out of their control, regain some control back should they wish and die with dignity.	Not Answered	I don't think that a person should have to wait 14 days before being able to get the medication. I feel that if they've reached out to get it, their mind is already made up
Agree	It is all about choice and options	For over 1 year	In some cases people of sound mind may know many years in advance that they would wish to have an assisted death if they were terminally ill or had a significant life limiting condition , so a living will is important. Assisted dying gives the ill person control should they choose that option.
Agree	For those who know they will be die and some point due to their illness. Having the ability to choose when that will happen, rather than suffer through the life cycle of their illness and degenerative nature, can be easier for the individual and their connected family to deal with.	Not Answered	
Agree	Dignity in death much better than suffering and just existing.	For over 5 years	
Agree		For over 5 years	I do believe health professionals need to bw involved in the administration of the drugs. Once taken the family should be allowed to have their last moments with their loved one.
Agree	We should all have a choice when it comes to our end years. Dignified dying should be permitted	Not Answered	

Agree	<p>People should be allowed the choice to live or die, specifically those who have a debilitating condition and those whose quality of life is severely low.</p> <p>We on the island do not have a robust animal rights bill, however if the animal is deemed to suffer and its quality of future life deemed poor, we have a choice to end the animals suffering by ending its life. We should be afforded the same choice, in these same conditions, fir ourselves.</p>	Not Answered	
Agree	<p>An individual should have the right to choose how & when to end their life if their circumstances are such that it is in their best interests</p>	For over 5 years	I think it is time this was introduced as we should be allowed to make a decision about our own lives with the correct protocols in place protecting the vulnerable
Agree	<p>Allowing mentally sound and well informed adults to die on their own terms will prevent needless suffering and grant them - and their families, by extension - dignity and peace of mind in death.</p> <p>It'll never erase the pain of loss obviously but there's comfort for those left behind that their loved one didn't have to live in pain or with a lower quality of life.</p>	Not Answered	
Agree	<p>We should have the right to choose how and when we die if we are of sound mind.</p>	Not Answered	
Agree	<p>Both my father and uncle suffered needlessly with terminal illnesses. Both were strong men who knew their own minds. One became a member of Dignitas, but COVID prevented him from travelling. I had to watch them slowly dying horrible deaths. Their quality of life was very poor. If they had been able to choose when they died, it could have meant less suffering for both them and their loved ones.</p>	Not Answered	
Agree	<p>Any human should have the right. If we see our pet suffer we will do what is right, yet humans have to keep going until their body gives up</p>	Not Answered	<p>I don't think you should use 2 doctors - I think if you are under care for a condition this is enough, the waiting times are already crazy. You can't even get a doctor to sign a letter to commence a power of attorney, it's near impossible over here!</p> <p>Also if it's in your will, surely a person suffering dementia could also opt to use this, they obviously can't sign a consent at the time. I'm currently caring for a parent with dementia and I don't want to be going through what they are right now. I would rather this option available to me, as I don't have kids to care for me!</p>

Agree	I believe we should have the choice of dying if we are suffering from a condition which is or will shortly cause us pain, suffering or anxiety and which will adversely impact our quality of life or indeed the quality of life of those we love or love us.	Not Answered	I suggest the IOM consults with the organisation which provides assisted dying in Zurich, Switzerland. We lived in Geneva, Switzerland when the scheme was implemented and the provisions were carefully considered and debated and the law seems to be clear yet respectful. The IOM could offer assisted dying to persons from overseas - as is the case with the provider in Zurich. There are many ethical and moral points to discuss and consider - as was the case in Zurich - but perhaps the freedom of the individual to choose should be the key factor in the decision, backed up by medical evidence to support the decision to die. I am in favour and hope the required legislation in passed. When my time comes I hope I have the choice.
Agree	We do not let animals suffer..So why do we let people suffer ???	Not Answered	When its the end, why should they be left to suffer...Please help them to leave and be at peace..no more suffering..
Agree	I know of many friends who have cared for their terminally ill family who have said it's an awful death, painful, distressing to the person and to those caring for them. If they could have done more they would have.	Not Answered	If an animal needs to be put down, it happens. If a human is suffering, they should have the right to decide that enough is enough and it has to be while the person is of sound mind to make the decision. Once the suffering becomes too much and they start to be given heavy duty drugs their capacity to make that decision is taken away and it's too late.
Agree	My father was very ill with MS, he suffered for a very long time, approx 20yrs. Towards the end of his life, which he was only 57, he could only communicate with his eyes, I could see his pain within, I am 100% certain that if this was legal and permitted over here he would have chosen this, for himself and for the family	For over 1 year	
Agree		For over 1 year	
Agree		For over 5 years	
Agree	Having witnessed it myself being terminally ill can often be extremely painful, and prolonged, and causes unnecessary suffering to both the patient and the families of the patient. Although this cannot be totally avoided it could be reduced with the introduction of assisted dying. I believe there are a lot of resources that are used during this period of time that could be avoided if patients were given the option of assisted dying. These could then be used elsewhere within the health service.	For over 5 years	
Agree		Not Answered	
Agree	People have the right to die with some dignity and on their own terms rather than suffering with continuous pain or dementia	Not Answered	With regards to children they should be of a mental age where they are fully aware of their illness prognosis like the information given to adults to enable make a informative choice. It must be the choice of the child that is suffering from a incurable illness and not anyone else
Agree	I believe that, subject to the safeguards proposed, individuals should be absolutely entitled to end their life when they believe the time is right for them.	Not Answered	As long as safeguards are in place and the vulnerable are protected under the legislation, I have no reservations. Assisted dying should be the absolute right of anybody who meets the criteria.

Agree	Working in elderly and end of life care gives insight into current policies which I feel need to change to protect from and prevent unnecessary suffering at end of life .	For over 1 year		Patients wishes should be recorded and adhered to when first diagnosed with dementia .
Agree		Not Answered		Patients choices should not be overruled by families when their capacity has declined.
Agree	I agree for terminally ill patients, in particular where end of life drugs are unable to control pain effectively	For over 1 year		There is no option to answer the question about re-considering as “no” - I am sure that if a terminally ill person is suffering so badly that they wish to die, they should not have to wait even 7 days. I have answered “not sure” simply because there is no option to answer “no”
Agree	If you are in hospital full of medication and know you don’t have long left .Its not fair on family watching you die slowly,and the doctors and nurse’s can spend their time looking after people they can help.	Not Answered		I feel that when the medication is given a health professional should be present but would not necessarily be required to stay for the duration unless requested by person or family. Signing to agree to this may be difficult for a terminally ill patient i.e MND and therefore another means may be required for giving permission.
Agree		For over 5 years		
Agree	All individuals with terminal or degenerative diseases should have the right to make their own decisions on their end of life care & passing	For over 5 years		
Agree		For over 5 years		
Agree	This is a fundamental human right.	Not Answered		
Agree	I passionately believe that people with a terminal illness who are suffering an unbearable level of pain should be allowed to decide how long they have to cope with that, and to bring forward the inevitable end of life at a time and place of their choosing. I appreciate that what is 'unbearable' for one person could be very different for another, but this is about personal choice.	Other	1 year seems too short, but 5 years too long. Perhaps between the two - 3 years	I originally ticked the 6 month box in Q9, but changed to 12 months because the essential procedures and checks outlined in subsequent questions could take several weeks - causing the patient to suffer physical and emotional pain longer than necessary.
Agree	If a person is terminally ill the end is horrific. You literally have to wait until the body dies naturally at the moment of no water/food which can take weeks. we would be taken to court if this was applied to an animal. The suffering for the patient and family is horrendous.. with family members never ever losing that memory... it can make remaining members more determined never ever to see a loved one ever going through that process again. I personally, if diagnosed with a terminal illness, would WANT to be in control of my own death and don’t like the idea of any needless and unnecessary suffering for both me and my loved ones	Not Answered		
Agree	People should be able to choose	Not Answered		
Agree	I nursed my husband who had a terminal brain tumour and once the pain was too great it was harrowing for him and I	Not Answered		Some people are not able to write near end of life so signing something might be a challenge. MND etc
Agree	My father in uk was in a carehome he voluntarily stopped eating. He had excellent care in the home. Everyone knew he was dying. If there had been anything to help him so he didn’t go through weeks of pain. We had to watch him die slowly in agony.	Not Answered		

Agree	If your suffering you should have every right when you would like to die.	Other	
Agree		For over 5 years	
Agree	I have seen many people die slow, painful, lingering deaths that given a choice they did not want. I feel that given the choice some of them would have much preferred to have had the option to choose when they died.	Not Answered	I feel we should have the right to choose assisted dying. Long term suffering and slow painful death for those who would choose assisted dying is not fair on the person or their loved ones. When your family member is asking to die because of their suffering and they can do nothing but endure the pain it is awful.
Agree		For over 5 years	Not sure this should just be medic led. Most assessments require a more holistic approach as other areas of need, ie financial need, support requirements from family may be motivating factors and assessments should take place to make sure that all support that is available has been offered and all motivating factors considered
Agree	I believe that everyone should have their own decisions on what happens with their life. If someone doesn't want to suffer any more and make the decision to end their life then it should be their decision.	Not Answered	
Agree		For over 5 years	There should be a separate pathway for anyone travelling to the island specifically to take advantage of this option. Island residents should be part of the welfare offering and funded as such, whereas non-residents should only have the option of a private, paid for, route. We do not want, or need, an influx of terminally ill people moving to the island for a year so they can access the system.
Agree		Not Answered	
Agree	People deserve the right to die with dignity, which sometime their illness strips them of. Despite the amazing work of Hospice and other health care professionals, dying can be a painful, drawn out process that causes a lot of upset for the individual, so being able to choose to pass on their terms at what they feel is the right time is a last choice and right that they should be awarded.	For over 1 year	If there is significant objection to people choosing to administer the medication at home, could a stipulation be added that they take the medication and go through the final process in hospital or hospice? This may make it more accessible to some people who feel they do not want their family to have to deal with their death at home but still wish to die on their own terms.
Agree	Having watched my mum decline into dementia I think people should have the choice, when diagnosed with a disease that will drastically reduce or completely remove their quality of life , of when to end that life.	Not Answered	I think there is a danger in over formalising a process. Training in how to deal sensitively should be given to professionals involved and those who may need to give advice such as GPS. There should be a way for some Who has a concern to raise it. I don't support the time limit on how long some has to live as that doesn't allow fo4 diseases that get progressively worse over years.
Agree		Not Answered	
Agree	Having witnessed first hand the emotional and physical pain of a loved one at the end of life. The patient did not want this for themselves. In turn I wish to make my own decisions for my end of life care.	For over 1 year	

Agree	Particularly for MND type diagnosis, but people - as in the proposal - should have the choice.	For over 1 year		The numbers using the assisted dying route, do need to be available on request - not necessarily published.
Agree	People should be allowed autonomy over decisions about their own life and body. Nobody should have to suffer when coming towards the end of their life.	For over 5 years		A health care person needs to be around after the medication taken, but not necessarily in the room. This gives the family/ friends privacy with the dying person. Having the health care person around will give security to all the involved people.
Disagree	It is for God to call us when he's ready and not for man to decide	Not Answered		
Agree	I believe it is a human right to be able choose between ending your life and having to endure all that comes with terminal illness.	Not Answered		
Agree	Having lost our Mother to cancer at the young age of 51 when my sister and I were just 19 and 16 . To see a loved one go through so much pain and suffering should never be allowed . It should be some ones own choice to make the decision when enough is enough . This bill needs to be passed indefinitely .	Not Answered	It shouldnt matter if they are permanent resident or not. The persons wellbeing is the most important thing	It should be the persons own choice as with everything regarding personal outonomy
Agree	I believe that an adult, over the age of 18 years, should have the right to choose whether they wish to end their lives especially where they are diagnosed with a terminal illness.	Not Answered		If legalised, I believe the Island should consider allowing those based off-island to come to the Island to access the Assisted Dying service. To facilitate this, the Island should require notification from medical professionals based in their countries that they can confirm that the person has a terminal illness. When on Island, the person should then go through the IOM process that will be applied to Manx people living on the Island.
	Whilst it is noted that the right to die is at this stage focuses on those with a terminal illness, I would like to see this extended to those who have a severe disability after suffering an accident or similar. For example, If I where wheelchair bound and have no control over my body or bodily functions as a result of an accident, then this may have an impact on me and others - this ability to plan and permit me to write a living legal Will should include the option for the 'right to die' if I choose this. It is also this avenue that I feel should be open to people where perhaps they are in a comma or on a life support machine; again, this approach would take the responsibility away from family members having to make a decision should I suffer from a accident which would impact me long-term and ruin my standard of life going forward.			
Agree		For over 5 years		If the patient is taking the medication at home I don't believe a health care professional needs to physically be there but it would be beneficial to have the option for safety concerns (if anything were to go wrong)

	Agree	Definatelly. i have at the bedside of 2 who were put on drivers and sat watching until all tgeir organs stop. Most families cannot sit at the beside 24 hours and share the care. However sometimes your nit there st the time they pass	Not Answered		Q15, 18,,29, The option answers are not in enough depth Having watched my mother in law die with dementia, my father in law pacriatic cancer and a very good friend of a gioblastoma brain tumor I am fully aware of how different people cope with these situations. My friend wanted my husband present during all of his hispital appointments and operations to ask the questions him and his wife were unable to as the would freeze and blank out what was being said. My father in law had a carer that pushed him away from his family, telling him his family werent there for him My mother in law was not even talking at the time she died and would not have understood anything the doctors were saying. My father in law was next of kin would never have agreed to end of life for his wife as he never wanted her to die. She however would not wanted have lived in s body with no mind. Each case is so different and needs further options Q20 there should be no cooling off period. A person should choose the date and they would get to say goodbye with their loved ones. I do believe it should be in a mefucal setting, hospital or hospice which then allows the family not to have to deal with the aftermath
	Agree		Not Answered		
	Agree	Because sometimes 'life' isn't worth hanging on to, when it involves loss of ability/dignity, or increased pain/reliance on others, or hideous medications that have more side effects than the disease/illness they are meant to be helping.	Not Answered		
	Agree	a person who is terminally ill should have the right to assisted dying. Anyone who who has made that decision should not have to travel long distances away from family or familiar surroundings. People who object to assisted dying do not have to use it and should not have a say to prevent those who do.	Not Answered		I want the right to decide and believe I should be able to state so in a living will made and witnessed when fully competent.
	Agree	Because although end of life palliative care is good, the person dying is just existing, they themselves want to die. If it is requested, we should not deny them.	Not Answered		There should not be reams and reams of red tape. If a health care professional is required to be present and no-one is available then what would happen? We don't need to know how many people are using assisted suicide, that is their own private business.
	Agree		Not Answered		I want the right to decide and I would like to be able to do this in a living will which has been witnessed as being written when mentally competent. I believe it is my right to choose and should not be blocked by those who oppose.
	Agree	It's up to those involved in this decision to make it and not others. I fully support the right of an individual to decide for themselves	For over 5 years		It should only be available to IOM residents whom lived here at least 5 years.This I feel.is very important so we don't get in a similar situation as Switzerland. I also think anyone standing for MHK should declare their position on this subject

Agree	I would not want to live indefinitely with a terminal illness in pain with no quality of life	Other	Family members	
Agree	I think it should be allowed. if someone wants to die they should be allowed to die. obviously some clarifications should be undertaken as to why but the argument stands.	Other	access for all	i think the principles are sound
	the next question about life expectancy which doesn't have a comment box, given ten years to live we a slow degenerative illness, with still 5 years left you may be immobile and depressed and not want to live because its only going to get worse. the limit is personal choice. Even for physically fit person, they may rationally choose to die having being tormented mentally by illness for their entire life, let them die if its what they want.			
Agree	From both a resource and ethical perspective:	Not Answered		
	Ethical- love for others both the ill and those around them. It is cruel to deny a swifter end to suffering if it is within our power.			
	Resource- freeing up scarce resources (healthcare, social care, burden on families) would benefit across a wide range of areas in our community.			
Agree	I believe that any individual has the right to make the decision to end his / her life within the constraints of the legislation. I would definitely do this if the circumstance arose.	For over 5 years		Residency Questions - I do not feel comfortable with the Isle of Man being seen as an Assisted Dying Centre of Excellence of non-island people. This scheme should be for legitimate island residents only.
Disagree	I believe life is precious, and we shouldn't be able to decide how long we are here.	Not Answered		
	It was very traumatic having my pet euthanised, and a human would be much worse. I still feel guilt and definitely was pressured into it, even though I didn't believe it at the time.			
Agree		Not Answered		
Agree	Extremely cruel life for patients and for the family around them to watch their loved ones deteriorate, and suffer. Animals are not kept in these conditions so why should human beings be kept alive suffering pain along with an undignified existence.	For over 1 year		get it started asap - too many people suffering a cruel end.
Disagree	I am extremely concerned by what's happening in Canada and very fearful once legislation is in place to allow assisted dying it will be amended and become far more wide ranging than originally intended. I am also concerned about those who lack mental capacity and have no family or friends to support them, how long before 'best interest' meetings are held and decisions made by professionals?	For over 5 years		
Agree	People diagnosed with a terminal illness and/or have unbearable suffering should be given the choice when they should end their own life.	For over 1 year		A person should be able to decide where they would like to die. i.e. at home or in a hospital setting.
Agree	I feel you should be given the opportunity to decide for yourself	Not Answered		

Agree	I think we should be able to have assisted dying , as I working in care for 18 years I wouldn't want my family to see me wasting away For weeks or months !! It's no life .	For over 5 years	
Agree	Having watched my father starve to death over the course of two weeks because stopping eating was the only way to hasten the agony he was in from the leukaemia in all his organs and hearing family members state they prayed for his death so he was free from the suffering he was going through, how could I not want someone to at least have the choice that is given to animals that are suffering? We put animals down because it's " for the best" so why can't humans have the same care?	For over 1 year	
Agree	We don't let animals suffer, why with the appropriate safeguards should a human not be allowed a dignified end to their life. It is distressing to have a loved one plead for assistance when it is denied by the law.	For over 1 year	
Agree		Not Answered	<p>Whilst I agree and support the proposals of Dr Allinson I strongly believe that the options should go much further.</p> <p>I am 77 years of age and I am in good health. I had two major primary cancer operations 27 years ago from which I recovered but now I am without a sigmoid colon and a kidney. This has had no impact on my life and I am fully active and regularly walk in excess of 10,000 paces per day.</p> <p>I believe that I should have the right to decide the manner and timing of my death and I do not see why the politicians and or the church should be able to deny me this, my basic human right.</p> <p>I have had a good life and I accept that one day I will die. I have seen my parents suffer through long and painful deaths and I have no intention of going through the same myself. When I decide that I have had enough and the time is right to pass on to a better place I fully intend to do so. The problem is of course 'how to do it'. I could walk into the sea. I could jump off Bradda Head. I could buy something off the internet – but the problem with this is that you can never be sure that what you are buying will do the job properly. What I really need is a properly regulated pill or drink that I can take before going to bed, after a lovely meal and a bottle of wine. I would be more than happy for this to be prescribed by a doctor and logged so that there is 'control' over the process but I do believe that I should be given the right to store it and decide when to take it.</p> <p>My primary motivation is that I strongly believe that I should have the right to choose what is right for me. I know 'me'. The politicians don't – the church doesn't so why should they assume that they have the right to decide such an important thing for me! Believe it or not they</p>
Agree	No one should be made to suffer, we don't let animals suffer but will put a human through it. If someone of sound mind declares they are tired and have had enough we should respect that.	Other	I don't agree they should have to be residents.

Agree	We do not let our animals suffer allowing them to die peacefully at the required time to end suffering, however, we make people live in pain and lose all dignity, often in despair and terrible mental and physical suffering because there is nothing to help them to die at a time they want to.	For over 1 year		Do this as soon as possible
Disagree	The principle of assisted dying is far too convenient in a society wherein convenience is a ruling factor of most if not all arrangements. It also lays the foundation for amendment in the near future within legislation allowing medical qualification to evoke a decision for such on behalf of a terminally ill patient and beyond the wishes of patient or dependents. It's both emotive and irrevocable and a step closer to the 'humane' cessation of the life of other species whilst all life is terminal with or without our assistance.	Not Answered		I leave some of the aforementioned questions as administrative to an acceptance of a prior conclusion of provision of assisted death which is wholly wrong within an initial public survey with an agenda which should never be part of a remit of political decision influenced by political need of elected individuals.
Agree	I have watched my husband die a slow death over 3 years, and also witnessed the gradual death of many other people. The last few months were devastating. People are often stripped of all dignity, suffer great pain and have absolutely no positive quality of life. I am in my 70s, still relatively fit but have no wish to end my days in such a distressing manner.	For over 1 year		Some people might be too ill to sign a written declaration, and some might be physically incapable of administering the medication themselves - help might be needed. I am definitely in favour of this Bill. A “good life” is important - but so is a “good death”. Thank you.
Agree		Not Answered		
Agree	Modern medicine has advanced to the stage of prolonging life beyond the point that it has any value for some people. If an individual has a terminal disease that will definitely result in death, perhaps a painful and unpleasant death, then it must be right that the individual's has a choice on how and when they die. Additionally, quality of life is as, or more important, than length of life. Some individuals endure extensive suffering from untreatable conditions. Again, they should have the choice as to whether their life is worth living	Other	While not supporting 'suicide tourism', I think the IoM can set an example to the world on how we can support people in making the ultimate personal decision about their life - how it ends	
Agree	I believe most aspects of our lives involves us making our individual choices, however death appears to be the exception. I find it very unsettling that we as humans have the right and ability to assist our beloved pets along with the approval of our vet, to end our animals suffering. Yet this is not the case for our human family.	Not Answered		Allowing someone to have control of when they choose to end their life and preserve their dignity is vitally important. Unfortunately end of life care and treatment is not dignified and distressing for all involved. Choice for the patient is vital and will allow them to feel in control of their suffering and knowing when enough is enough
Agree	It is a humane thing to do.	For over 5 years		The reason I ticked that a person could be under 18 is that there are young people who could be well informed and wanting to make a decision about their continuing but disintegrating life and should not be excluded from doing so.

Agree	<p>My step-father (a Royal Marine bandsman) suffered from multiple schlerosis for 20 years, 5 of which were bed-ridden. He died in 1976 aged 56. He went from a 14 stone man to a five and a half stone skeleton. My mother cared for him at home until the last three weeks. He went into a nursing home only to develop huge bed sores which were not present when being looked after at home. He wanted to die and we couldn't do anything about it. If he had had assisted dying at a time of his choice he would at the very least been able to die at home in his bed and not had the addition of painful bedsores at the end.</p> <p>My mother took her own decision to die, aged 94, after being trapped in her body for 13 years (without speech, deteriorating hearing and sight) from a massive stroke, by refusing all medication, food and water. She took nearly a week to die. I and my sons sat with her 24/7 for four of those days. She was an intelligent and vibrant woman, who read widely, wrote poetry and stories. She had always told me that if she was ever in a situation that she could no longer bear, she would take her own life, so that is what she did. She did not have any alternative. If she had, then I believe she would have taken it.</p> <p>Neither of these good people should have had to die in these circumstances. Neither would have been able to sign their names to a form, by the time of their deaths or even earlier.</p>	Other	<p>For the reasons given above on page 2. Any person who is in an intolerable personal situation should bee able to look to the medics for help</p>
Disagree	<p>We have a hospice to support patients. It's totally against what they stand for.</p>	For over 1 year	<p>I don't agree with it at all. Its a very dangerous ground. The island does not want a label of "island of death".</p>
Agree		For over 1 year	<p>I would be really concerned if this law is past. This need to be done with the upmost care possible I do also believe people should have a period of time to reconsider right up to the point the medicine is to be administered</p>
Agree	<p>This necessary for human rights .</p> <p>Good for the Isle to be leading in the right direct .</p> <p>Use our independence for change in a good way.</p>	Not Answered	
Agree		Other	<p>3 years</p>
Agree	<p>Having been close to people who have both suffered and wished for it to end I can see no reason to not allow assisted dying.</p>	Not Answered	

Disagree	<p>I am opposed to bringing in assisted dying on the IOM for the following reasons:</p> <ul style="list-style-type: none">•Assisted Dying is offered to alleviate suffering: Suffering is very subjective and not inevitable if good palliative care is provided. The palliative care service available on the IOM is recognised to be of the highest quality and so assisted dying is not required here.•Vulnerable patients, who may have just received news that they have a terminal diagnosis and are consequently low in mood, may feel under pressure to ask for assisted dying so as not to become a burden on their families. This is exploitation of them at their most vulnerable time.•The safeguards which usually accompany assisted dying laws haven't worked in other jurisdictions and may well not protect the vulnerable of the IOM <p>I am concerned about embarking on a "Slippery Slope" - gradual societal desensitisation to active killing leads to boundaries of the original law get stretched over time as has happened in Holland, Canada and Belgium. Numbers dying this way have gradually increased in all jurisdictions.</p> <ul style="list-style-type: none">•Assisted dying legislation erodes the idea that all lives are valuable and worth living even those with illness and disability•By moving ahead of the rest of the UK the IOM may see an influx of seriously ill patients awaiting the "permanent residency qualification period" to have assisted dying here – extra workload for IOM health services•The terminal illness timeline is imprecise – it's very hard to judge when a patient is in their last 6 months of life for example.•There is no easy or reliable way of pharmacologically producing a peaceful and painless death by taking tablets, which is suggested for the Isle of Man.	For over 5 years		There should be no financial incentive for health care workers providing assisted dying
Agree	<p>Supports an individual's right to self determination.</p> <p>Reduces an individual's suffering.</p> <p>Allows a person to plan and control the timing of their own death</p> <p>Could reduce the number of suicides.</p>	Not Answered	N/A	
Agree	<p>I've seen many people being kept alive and been little more than a cabbage or suffering unbearably..</p>	Not Answered		Major subject not easy to cover in a survey but hopefully it reflects my view shows a basic agreement but with major safeguards.
Agree	<p>Obviously vital safeguards & checks have to be in place.</p> <p>I believe nobody should be allowed to to deny another person's right to end his or her life or to obtain assistance in doing so.</p>	Not Answered		Wherever the proposals require two health professionals action, this should allow only one if a second is not available, or not likely to be available, on the Island within in a resaonable time.
Agree		Not Answered		
Agree		Not Answered		
Agree	<p>I have seen people eventually die after unbearable suffering.</p>	Not Answered		I think the process is excellent.
	<p>Begging to die, their request has been denied them.</p>			I think the questionnaire is excellent.
	<p>Who benefits from this appalling state of affairs?</p>			
	<p>A good life ends with terrible punishment for the dying and for their family.</p>			
Agree	<p>People should be able to choose and not suffer unnecessarily</p>	For over 5 years		

Agree	It should be a person of sound mind right to make this difficult decision for themselves.	Not Answered	
Disagree		Not Answered	
Disagree	I am opposed to 'assisted dying' for a number of reasons: 1. Essentially I hold strongly to the principle that all lives are equally valuable, whether the person is well, physically or mentally unwell, fully able or disabled in any way. I believe that 'assisted dying' has the potential to dismantle that principle. 2. As a doctor, having spent a lifetime's career trying to improve people's wellbeing, and to find increasingly sophisticated ways to prolong quality and quantity of life, I could not conceive of a situation in which I could be a part in ending a patient's, or any other human being's life. 3. There is a significant risk, should this become law, and over time, that vulnerable people would feel increasingly pressurised to ask for their lives to be ended, being persuaded that it places 'a burden on those who care for them'. This includes people with reduced mental capacity, learning disability, mental health problems, and those with a terminal diagnosis, or even a 'life-restricting chronic illness'. My professional experience has been that patients in such very vulnerable states are highly sensitive to others' opinions and expectations, and lean heavily on others' advice. 4. Once assisted dying becomes 'acceptable' to a society, as with so many other morally controversial areas, that society becomes progressively 'desensitised' to it, allowing the law to be gradually stretched. This has happened with abortion laws and practices in many countries, for example. In regard to assistesd dying, this is borne out in countries in which the law has already been changed - Canada being a prime example.	Not Answered	
Agree	We euthanise sick and dying animals out of compassion. Where is the humanity and compassion in forcing a terminally sick person to suffer through an often painful last few months, where they could choose a dignified exit on their own terms? It's galling to me that this is still a debate.	Not Answered	14 days grace period is way too long. Max 7 days and should be 2 days max for those with a less than 30 day prognosis. Any conscientious objectors should NOT be able to provide the Doctor's consultation. They should simply be excluded from the whole process. Any Religious objectors should also be kept out the whole process. Just please stop criminalising peoples dignity, and drop the Nanny/Religious state stance.
Agree		Not Answered	Have an agreement with other governments of countries without assisted dying provision that prevents prosecution of relatives, carers and professionals facilitating the individual's process and travelling to IOM.
Agree	I strongly agree if a person wants to end there life due to them not living the way they wanted why should someone have to spend everyday in hospital waiting to die when they can have a say in the situation	Not Answered	

Agree	There is no dignity being of sound mind in tremendous agony at confirmed end of life	For over 5 years	Do this quickly and professionally and become a beacon for other countries to look up to and follow
Agree	<p>I agree that assisted dying should be permitted for terminally ill and to be considered for those that are failing in other ways too.</p> <p>Anyone who's quality of life is going to be seriously affected, by any diagnosis, in a way that they themselves feel they would not wish to be alive to endure, is in my opinion an absolute right, a basic human right for the consideration of any method utilised in that of assisted dying.</p> <p>That old saying "you wouldn't leave an animal to suffer" Well it's beyond time that the same was said for human beings.</p> <p>Also, I don't fully understand Q:9, on this public consultation, "Do you think that there should be a limit on their life expectancy?" Please clarify.</p>	Not Answered	<p>Assisted dying is exactly that. There should be clear and concise wording in respect of the legalities involved. There should be no possibility of misconstruing any wording it should be written in plain English.</p>
Agree	<p>If I had was in palative care stage of life, Id want to die.</p> <p>It isn't a life. I watched my mum slip away for two years. I actually said to her, two days before she died this year "Mum, I'll be ok. You can go when you want. I will miss you but be at peace".</p> <p>As long as there are measures in place to decide who can be assisted in dying then I am for it but there has to be certain measures and criterias in place.</p>	For over 5 years	
Agree	I feel very strongly that if an individual wishes to end their life they should have free choice to do so.	For over 5 years	
Agree	<p>Witnessed terminal illness and life limiting conditions taking lives and been asked to assist with the death but can legally only provide comfort measures.</p> <p>Some deaths in this situation are horrific and thus could be prevented by this legal framework</p>	For over 1 year	<p>Lots of safeguards for affected patients/public AND medical/nursing/pharmacy etc staff involved so anyone who helps the person will be safe from prosecution or investigation</p>
Disagree	<p>This is a slippery slope. The risks FAR outweigh rewards. The rewards being; lowering the grief of family members by a fractional amount by knowing their loved ones didn't suffer as much. Relieving (in the grand scheme of things) a small period of intense pain at the end of ones life. The risks being; history repeating itself and this legislation being the spark of genocide. Nazi Germany used almost identical laws. Please thoroughly research operation/aktion T4. Whilst it seems over dramatic to suggest this, it is a step in an incredibly worrying direction, our society said we would never again make the mistakes which led to WW2. Even if we put a future genocidal government to one side, it's a bleak view into a dystopian future that would see the most barbaric abuses of power. The power to create a scenario of government sanctioned murder for all of the usual motives: discrimination (of all types), revenge, financial gain, crossed love interests, et al. The litigation on Drs will be extraordinary.</p>	Not Answered	<p>The people that have added questions about under 18s being allowed assisted death should be ashamed.</p>
Agree		Not Answered	

Agree	People who have a serious long-term illness that they're not going to recover from should be given the autonomy to decide if they would like to die peacefully. This will prevent people dying in pain and suffering in the last months of their life.	For over 1 year	
Agree	The key principles to person-centred care and holistically treating individuals are allowing autonomy for people to make their own choices. A terminally ill person already knows they will if that person wishes to end their life at a time that suits them; who is anybody to stop that? Everybody talks about how awful it must be to have a terminal illness, to slowly lose the abilities you once had, often becoming a shell of who you once were - everybody discusses how hard it must be for the person and their loved ones, assisted dying allows those who wish to die before these heartbreaking points to die with dignity, and in the way they like. everybody is all too familiar with the terminal illnesses that steal a person's control and often their entire life; the least we can do is allow that person to take back control regarding their own death. Everybody has a right to die with dignity.	Other	Proof that they have a permanent residence on the island. I have held the hands of dying people, in agony, slowly dying as they have begged to die. These people even questioned what they'd done in their lives do deserve the pain and torture of a slow death. Please, please allow people control over their deaths.
Disagree	Not enough safe guards against misuse.	For over 5 years	
Agree	Reduce suffering of individuals	Not Answered	
Agree	Personal experience. My father died of cancer but was compos mentis for the two years. Towards the end, he told me that he was so exhausted with the procedures and the indignity of his condition that he wished there was a way of reliably and painlessly ending his life. I don't hold a view on whether that was a moral decision but I do strongly believe that it should have been his choice. PS. My answer to question 9 is "No" but you haven't supplied that option.	Not Answered	I'm grateful for the opportunity to comment on this topic. Thank you.
Agree	Within my line of work, and personal experience, to let someone have a dignified death is very important. Too many people suffer for too long and it really isn't fair.	Not Answered	
Disagree	No one is to take their own life. No one fully understands how they came into being to be part of the world in which we live in. Miracles happen where people with debilitating conditions have recovered fully and live a normal life. Taking away the life of another person has life time consequences on that individual or group who decide and actually practice it. In my opinion I would strongly plead against assuming steady dying proposal.	Not Answered	
Agree		Not Answered	Question 10 is biased. There is no option for a no answer

Agree	<p>I have seen both my parents die with cancer, I have seen how much they suffered and were in constant pain, to quote what my mother said before she died, "the pain is worse childbirth, at least I had something to show for it".</p> <p>At the end of their lives they were both dependant on other people to do most things for them.</p> <p>I don't want to have to go though the same things that they went though.</p> <p>If you kept an am alive and it was in so much pain you would be done for cruelty, why it OK to keep a human being alive when it is clear that they will never get better and they end up loosing their dignity.</p>	Not Answered	<p>with reference to question 22. Should the person themselves or a relative be able to collect the relevant medication from a designated pharmacist? I feel this type of medication should only be administered by a healthcare professional.</p> <p>I have seen both my parents die with cancer, I have seen how much they suffered and were in constant pain, to quote what my mother said before she died, "the pain is worse childbirth, at least I had something to show for it".</p> <p>At the end of their lives they were both dependant on other people to do most things for them.</p> <p>I don't want to have to go though the same things that they went though.</p> <p>If you kept an am alive and it was in so much pain you would be done for cruelty, why it OK to keep a human being alive when it is clear that they will never get better and they end up loosing their dignity.</p>
Agree	People should have the right to end their life if terminally ill	For over 5 years	
Agree	<p>Having watched my father deteriorate over a number of years due to Alzheimer’s and seeing his independence slip away, I feel that anyone who (and only at a time of having a sound mind) should be able to make the choice when diagnosed with a terminal illness or a degenerative disease that will eventually take away their ability to carry out every single function to end their life and suffering.</p> <p>My father passed away in January and for the previous 3 years had little to no quality of life. Having tried to take his own life in December 2018 as he did not want to face further deterioration and lose his dignity. He was of sound mind then and subsequently he was sectioned, he lost all his self worth, his dignity and we as a family lost the man that we had loved and looked up to for all our lives. Then we had to see him become incapable of doing anything for himself, seeing the sadness and humiliation in his eyes when me, his daughter would shower him and take him to the toilet or clean up when he’d had an accident. It’s degrading and humiliating for a dementia or Alzheimer’s sufferer to be put through this.</p> <p>As for a terminal illness such as cancer then why would you put someone through invasive and potentially damaging treatments to keep them alive and delay the inevitable? Every person should have a right to make a decision on how they wish to die when they are of sound mind that if you are diagnosed with terminal cancer or a degenerative disease.</p>	For over 1 year	<p>I firmly believe that a provision in a living will for what you would like to happen should you receive a terminal illness diagnosis should be available to all people aged 18 or over.</p> <p>My concern is that as in my fathers case, he did not want to continue living when he was only going to lose his own abilities and dignity, yet given what is proposed to be included in the bill wouldn’t cover an Alzheimer’s or dementia patient as they wouldn’t be of sound mind to request assisted dying in latter stages of the disease. So they would be left to suffer to the point of the brain being unable ti tell the body to swallow and essentially starve to death as my father did.</p> <p>I feel so strongly about the option to be able to choose what happens to you in this situation after seeing it first hand so recently.</p> <p>I, as a 46 year old woman with family history of my mother dying of terminal cancer aged 63 and my father dying of Alzheimer’s at 74 would like to be able to make a request now whilst of sound mind that if I followed my father and develop a form of dementia that my life could be ended and so avoiding hurt, mental and physical anguish to both myself and my family.</p>
Agree	<p>What is the point of keeping someone alive who wishes to die?</p> <p>As long as they aren't coerced in to the decision given they are probably vulnerable it is ultimately their choice.</p>	Not Answered	
Agree	To give those who need the help the option of having control and dignity, and avoid long suffering for them and their families	Not Answered	

Agree	It is up to the individual to decide always subject to them being given professional and independent advice from the healthcare system. In addition, that they have full legal capacity based on the balance of reasonable probabilities and not those subscribed by the medical professionals.	Other	Surely, it is obvious to determine is somebody is a permanent resident. Look at the employment rules.	Your questionnaire misses an obvious point and you live alone and have no next of kind - kinda of obvious?
Agree		Not Answered		
Agree		Not Answered		
Agree	A person of sound mind should be able to choose assisted dying if they wish following strict guidelines. We don't let animals suffer so why should people	For over 1 year		
Agree	If you have ever watched a loved one die inch by inch in pain & suffering, you would understand why I said YES I also have cancer & COPD and I do not want to have the long suffering my brother & Dad had	Not Answered		We would be in court & get fined if we kept an animal in inhuman conditions, so why can we do it to human beings? I know what my death will bring, and I don't want to die inch by inch, neither do I want my family to have to suffer watching. Have some mercy & let us die with dignity - PLEASE
Agree		For over 1 year		
Agree	Have watched people suffer in pain, it's cruel & unnecessary.	For over 1 year		
Agree	Who wants to be kept alive when you cannot move, cannot get out of bed, cannot talk, eat, go to bathroom..... suffering dementia, sit in a wheelchair a dribble down your front. Why ? What dignity is this for anyone ? Why would you want family, friends, anyone to see you like this. Also, the way the NHS is headed, who is going to look after you ? If you make a "living will", this should be respected by all.	For over 1 year		-Some Doctors would never sign off on a persons request so this could prevent it happening. How to deal with Drs who oppose this needs to be addressed. -How to deal with a person who has stated for years they want AD, but not made a living will and are now mentally incapable. Should the decision revert to family or ?
Agree	Teminally ill people should be allowed to pass with dignity at a time of their choosing of that is their wish	Not Answered		
Agree	I view this from two angles: 1. Control and empowerment by the individual to manage their inevitable death in the face of terminal illness or long term disease progression with divinity for themselves and their families, and 2. A pragmatic and reasonable use of public health resources, and the prioritisation of resources for where death is not inevitable, i.e. leukemia in children, where there is a path of recovery ahead. After watching family and members endure death through cancers, and other diseases, i saw that some illnesses have no recovery path, but instead a long and drawn out loss of quality of life and independence. Despite excellent medical and palliative care, I've watched family members at pain with having to be nursed and cared for for many intimate functions while enduring the erosion of strength and their spark. Watching my parents try to keep a smile on their faces when all they wanted was for the pain and indignity to stop and to be allowed to depart is an influence on my own views on assisted dying.	Not Answered		Supporting video consent by the patient and with the physicians would alleviate any arguments or manipulation of the patient's intent and consent. Family members can be odd creatures, and their own value system must not inhibit the patient's wishes. Religious bodies should have no role in the process of the Bill, nor any right to veto the patient's wishes. The decision and process should be purely based on science. Ideally, the patient has the choice as to where the final action takes place - either in the home, or in a comfortable facility at Nobles, or even outdoors in the Manx countryside if that is the request.

Agree		For over 5 years	<p>This is the best decision the IOM will have made in a long time. Why prolong life with unnecessary suffering when the person whose life it is does not want that.</p> <p>The only issue I foresee is objections from family members. I don't agree that people or family should collect the medication, I believe it should be held in the hospital/hospice pharmacy ready for use as and when it is deemed necessary and only once the consent has all been signed off.</p>
Agree	Personal family experience of a relative just waiting to die with no quality of life at all at the end	Not Answered	
Agree	As long as the individual (patient) is of sound mind to make a choice.	For over 5 years	
Agree	If a terminal ill person has so much pain, discomfort and distress, hates being totally dependent on carers with the knowledge they are going to get worse before dying then yes they should have the choice of choosing when and where they die. Personally, I would choose hospice care.	Not Answered	
Agree	After over 45 years as a consultant treating cancer patients I have seen the benefits of good palliative care to most. However for a minority palliative care cannot eliminate pain or nausea or other distressing symptoms. Some people have a distressing death and if they choose should have an option of assisted dying	Not Answered	<p>The life expectancy should be 12 months: it is difficult for us as doctors to be precise and the process can take time to work through. In addition patients with motor neurone and other debilitating disease can be suffering intolerably and lose the ability to take drugs more than 6 months before death</p> <p>I do not agree with 2 doctors. This may be hard to achieve if doctors are opposed and will have no benefit. The role of the doctor is</p> <p>1 to give a diagnosis and rough life expectancy 2 to certify the patient is not unduly depressed or mentally ill</p> <p>I do not believe doctors should otherwise be involved unless retired as the public need to be clear no practicing doctor ends life. If the doctor cannot answer question 2 then a psychiatrist should be involved. We should have a list of psychiatrists willing to offer this service. Then the primary doctor is only being asked for facts, not to give opinion on assisted dying, and cannot refuse. Any alternative might lead patients unable to proceed if their GP and or consultant simply stated they were opposed to euthanasia and unwilling to sign an 'assisted dying form'</p> <p>I believe the second person involved should be a lawyer or social worker to assess the situation and ensure there is no undue pressure on the patient. New Zealand uses a judge which is excessive but a non doctor adds objectivity</p>
Agree	People deserve the right to choose when the end should come if they are terminally ill. I have watched parent and in-laws die very slowly and painfully in Hospice and if they had had a choice they would have gone sooner on their own terms	For over 1 year	
Agree	It's a choice we should all have	Not Answered	

Agree	<p>You have carried out in your available information, a thorough investigation of circumstances.</p> <p>These circumstances should be very seriously upheld and monitoring will be required for safe guidance.</p> <p>As a health professional I have seen sad, meaningful cases, but also from a mental health , lack of understanding from some patients, vulnerability is a major issue. It appears that your body of information may address these issues.</p> <p>If agreed, then I feel that the high importance of regular supervision, involvement of Clergy, patient spiritual adviser(if any) should be involved , offered in every case.</p> <p>Reviews in this important area , should be every six months for example....mandatory. Support to friends , family should be offered in every case, even though it may be declined in some cases.Grief takes many forms and behaviours.</p>	Not Answered	<p>The patient should always be in control if mentally competent.</p> <p>Medical and professional s should have a high level of training, updated annually, a list of suitable professionals , held. Supervision, accountability , skills evident with excellent communication skills essential, and working with family, next of kin, close friends, partners, May require a small team of high level skills, balanced professionals to offer this highly effective service. The highest available, and if it becomes too much, or they cannot carry out this work, then they should be removed, as this is the highest level of skills / practice empathetic relationship, whilst also requires a turn around if there is a change of mind from the patient. Not every body has these skills, hence close supervision with decision making will be required.</p>
Agree	<p>After unfortunately watching several close relatives suffer at the end of their life due to degenerative conditions. It has to led me to the opinion that were I personally ever in the same position i.e. approaching end of life with increasing pain and discomfort and no prospect of improvement, I would like the option to legally terminate my own life.</p>	For over 1 year	<p>My slight concern is more in relation to 'Death tourism' by this I mean that people visit the island with primary intention to seek life termination, and how we would approach this.</p> <p>I believe that if the Isle of Man were to have assisted dying in place before the UK /Ireland, or if those regions explicitly banned this. that the possibility of interest from residents in those areas could be large.</p> <p>Although I have no moral objection to this, and would consider this myself were assisted dying not available on Island. We may need to consider the our position in relation to providing services to non residents and how we deal with ongoing issues related to it.</p> <p>I'm also concerned as an Irreligious person, that my choice to end my own life and the results of this consultation, may be affected by the opinions of those who may be religiously opposed to it. I feel that a religious organisation should have no position in policy making where it may affect those who have no belief in that religion. I'm concerned that this may not be the case.</p>
Agree	<p>Working as a nurse for many years I saw many people die, often in pain or virtually unconscious from opiates. On more than one occasion my patients asked if I could give them something to end the misery.</p>	Not Answered	<p>It is important to ensure no body feels under pressure to end their life. I have been aware of patients 'not wanting to be a burden' on their relatives, that is not a good enough reason. I don't think it needs to be two doctors making the decisions. There are extremely highly trained nurses who would be more than capable of taking on the role.</p>

Agree	<p>It is an act of gross cruelty to prevent an individual in great pain and inevitable death not have the choice to end their suffering as they wish. Why must suffering be unavoidable especially when life becomes a living hell.</p> <p>External guidance must be in place to ensure safe practice. Administered in a simple and humane manner</p>	For over 5 years		<p>The collection from a pharmacy by the individual or relative is wrong and this and the administration of said drugs must be done by a medical specialist. This specialist be trained to understand and implications both for the individual and relatives. I have personal experience of this and the decision process in the case of my wife's death and it is imperative a medical specialist is present to administer drugs to end a life.</p>
Disagree	<p>Evidence suggests that with the best intentions at the onset these pieces of legislation will slowly be eroded away at until you end up in terrible situation like that in Canada where assisted dying is pretty much available to anyone.</p>	Not Answered		<p>As my earlier comment, I am not sure about many things related to the issue of Assisted Dying but on the balance would always want Life to be prioritised in all situations and that palliative care at the end should be encouraged and invested in.</p> <p>My main concern regarding this is that any legislation will no doubt start with safeguards in place and any number of checks and balances but no doubt as evidenced by other countries and areas where this type of bill has been enacted, these get eroded away as certain situations and peoples "rights" challenge the original intention.</p> <p>This is a dangerous road to go down and in a civilised society this type of legislation has many similarities in history to despot regimes that tried to eradicate certain sections of society. The cautionary tale of Canada should be enough for any politician to seriously consider whether this is the sort of society they want to live in.</p>
Agree		For over 5 years		
Agree	<p>All my responses are conditioned by the fact that my dear,dear wife died of MND. She wished to die about 6 months after diagnosis and about 6 months before she did die as her quality of life had disappeared at that mid-stage.</p> <p>This was over a decade ago and a major regret still is that we didn't go to Dignitas in Switzerland while she was still physically able to do so.</p> <p>This is no comment whatsoever on the wonderful care provided by our hospice, but the indignities created by this disease are disgusting.</p>	Other	<p>To meet whatever the current residency requirements are for free care from our NHS</p>	<p>Specific point - re Q 19 - signature may not be physically possible -so what if permission not included in living will/advanced directive?</p> <p>General overriding point - please enact this. The individual should have the right to choose.</p>
Agree	<p>I believe that if somebody is in that much pain that it is cruel to make them suffer further if there is an alternative. I only believe this in the extreme circumstances, such as when somebody is terminally ill for example with cancer</p>	Not Answered		<p>Question 18 - I think that an advocate should also be part of witnessing the agreements and signing of documentations.</p> <p>Question 22/23-I worry that other people could potentially access its medication to commit suicide, or cause harm to others. I think that the medication should be provided by two certified health car providers and healthcare providers be present to ensure that the person receives this in their own home or chosen location to pass, In case someone steals the persons medication</p>
Agree		Not Answered		

Disagree	<p>I am strongly opposed to the introduction of assisted dying on the IoM for the following reasons.</p> <ol style="list-style-type: none">1. All lives are valuable and worth living even in the face of illness and disability. Assisted dying legislation fundamentally erodes this.2. The aim to relieve suffering is by no means guaranteed by assisted dying. Suffering is very subjective and with good palliative care suffering is not inevitable. Palliative care on the IOM is currently excellent. I believe assisted dying has the potential to detract from this invaluable service.3. I think it inevitable that patients given a terminal or incurable diagnosis may slip from competency into the vulnerable state and may ask for assisted dying to avoid becoming a burden to family and society. The reality is many family members will have to live with the guilt of going along with this.4. Safeguards have proven to be unreliable in other jurisdictions.5. I believe history has shown once assisted dying is adopted for terminal illness, society becomes desensitised and further categories are more easily added such that euthanasia for mental health and non lethal illness has become available in other jurisdictions, for example Belgium and Canada. <p>With regard to the questionnaire I believe the format does not allow for objective feedback as many of the questions presupposes the respondent agrees in principle to assisted suicide.</p>	Not Answered		There should be no financial incentive given to any medical professional, Doctor Nurse or Pharmacist involved in any assisted death.
Agree		Other		
Agree	<p>As a farmer I've thought for many years that livestock have a better end of life than some humans; suffering is not prolonged in cases where a slow and painful death is a certainty.</p>	Not Answered		
Disagree	<p>This is a very slippery slope, that we should not go down.</p> <p>If this becomes law, then what next? Life is precious and should not be discarded so easily.</p> <p>Medical advancements are coming out all the time.</p> <p>We should not be asking our medical professional to do this, they enter that profession to save lives, not take them! Most of the medical professionals I know do not want to do this!</p>	Not Answered		<p>Many of the questions in this consultation are based on the wrong assumption that the respondents are in favour of the bill!</p> <p>How on earth can a consultation like this be issued which is so heavily biased towards being in favour?</p> <p>I feel like the decision had been made by the politicians already and this consultation is written to make it appear like the public are in favour!</p> <p>Killing someone is killing them, pure and simple. It should NOT be legalised - we are supposed to be a civilised society, instead this is taking us backwards.</p>
Agree	<p>It is inhumane to keep people alive for the sake of being alive when they're suffering through it. It's perceived as inhumane to keep a pet alive when they're suffering from a terminal illness, so why would we treat a human being with less dignity and humanity?</p> <p>Bodily autonomy is a right, and to take that right away, especially during a time when it's most important to the individual, is arguably barbaric.</p>	For over 1 year		
Agree	<p>Because everyone should have a choice</p>	For over 5 years		

Agree	It is very much an individual choice for the individual concerned or their family in the event that the individual does not have capacity	For over 5 years	
	organisations may have biased views which in the context of the overall consultation should be noted but not relied upon		
Agree	It is and should be an individual choice	For over 5 years	
Agree	I watched my daughter die from a slow painful death being destroyed by cancer.	For over 5 years	I think it's important to be able to amend the bill as time and experience come to light and highlight any issues
Agree	It's awful seeing loved ones suffering who are being kept alive when they have had enough and just want to pass peacefully	Not Answered	
Agree	nobody should have to suffer. we should have the right to choose,	Not Answered	
Agree	People should be free to choose when they die	Not Answered	
Agree	I 100% agree with Dr. Allinson, if proper measures are in place, then the choice should be made by the individuals. Religion should play no role in the decision-making process that leads to this bill being passed. It is about protecting the individual and their families with their choice, not about anyone else or their beliefs.	Not Answered	100% with Dr. Allinson, if proper measures are in place, then the choice should be made by the individuals. Religion should play no role in the decision-making process that leads to this bill being passed. It is about protecting the individual and their families with their choice, not about anyone else or their beliefs.
Agree	As an overarching principle, a terminally person should be able to decide when 'enough is enough'. Whilst palliative care can alleviate some or all of the pain that a terminal illness can cause, a person should have the right to decide when they do not wish to continue to live.	Not Answered	Personally, I believe that the right to die by assisted means must ensure there is genuine freedom to choose. Such freedom should not be overly constrained by legality (though I appreciate the legal aspects must be in place for those that are involved in the process) but should always place the wishes of the person at the centre of any decision-making process.
Agree	Sickness such as cancer eats away at a body leaving the mind clear. If we have a pet with cancer, we can choose to have it put down before it's body deteriorates and it suffers. Humans should have the same choice. It's hard to watch someone die of cancer. I can't imagine how hard it is to die of it.	Not Answered	I think the medication should be given at an agreed date the person take it and a medical professional stay as witness. It could be give in a hospital or in the person's home if they are more comfortable there.
Agree		For over 1 year	
Agree	Having witnessed pain and suffering of those towards the end of their life, I believe they should be given their choice	Not Answered	It should be a case by case situation. As such there should be “bending” of rules in some circumstances around how the medication or when it is taken. I believe a medical practitioner should be on “hand” at the time of death.
Agree	But only with the strongest safeguards possible in place and palliative care has shown to be insufficient to relieve pain.	For over 5 years	Assisted dying must not be regarded in any way an alternative to palliative care. Palliative care should be a priority whether in the hospice, nursing home or hospice. Social and financial pressures must not be factors affecting the decision and ways of alleviating these should be part of the discussion.
Agree		Not Answered	

Agree		For over 1 year		I think that it should be a persons right to die. I watched my mother suffer for years. My mother was in distress the whole time. Nobody should go through that. We definitely wouldn't let animals go through pain and suffering. I have looked into a Switzerland company called dignitas as I would definitely not want my family and myself go through the same thing my mother went through.
Agree	Every person has the right to live or die. We put our beloved pets to sleep to stop their suffering, the same should be allowed, for anyone who is terminally ill.	Not Answered		
Not Sure	Safety, coercion. practically of mode of occurrence.	Not Answered	Pay a fee for managing	Who are the 2 doctors? Not family doctors, not palliative care not psychiatrists. a specific doctor who willingly engages in this process. You cannot get capacity assessments for the living let a lone those wishing not to live. Death tourism of a fixed fee to cover the process. NHS care "from cradle to grave" but not speeding it up! I do feel that there needs to be an option for assisted dying. It is a very complex matter and this can only be considered if its to stop pain and suffering to the person in mind. No ! This bill should not even be considered.....
Agree	I feel that we treat animals better. To let a humanbeing suffer in pain when there is no hope for recovery is horrific.	Other	Unsure	
Disagree	As a Christian I feel its murder , and the 10 commandments say "you shall not murder" . Euthanasia is NOT God's way or God's plan for life .	Not Answered		
Agree	Except for being born, I have control of my existence for my whole life. There is no reason why that control should be denied me at any time, if that is what I wish.	Not Answered		
Agree	Of course it should be. Nearly every person has watched a family member suffer the most terrible pain and suffering. Nobody in their right mind would want to live like that. My father had an awful accident and lived with brain damage, he had to learn to do everything again and had seizures all the time, tunnel vision, terrible pain and the damage led to Parkinson's and Alzheimer's. My poor strong father was reduced to being an adult baby for around 7 years. He would never ever have wanted to live like that. The only people who don't want this bill are religious zealots and people who own nursing homes because that's where all the money comes from! Disgusting	For over 1 year		I fully support assisted dying. I think that this should be carried out with a healthcare professional and the persons chosen people. It shouldn't be available to get the medication from a chemist to just go home and take. That would be insane. Like I said previously the only people who will oppose this bill are people who profit from patients who are kept alive, ie nursing home owners.
Agree	Life is a choice that can only be made by an individual. However, in circumstances where an individual is unable to make that choice, perhaps because they are in a vegetative state, then a family member should be able to make the choice.	Not Answered		Question 9 - No. There should be no limit to life expectancy. Question 19 - Yes assuming they are able to write.
Agree	People should have the right to how and when they die, if they are termly ill	Not Answered		
Agree	I work in palliative care. Allowing people to make choices regarding the end of their life is simply the most compassionate thing we can change about our healthcare system, and is long overdue.	Not Answered		

Disagree	As with almost all laws and policies, what starts out with definite boundaries will suffer from the inevitable "mission creep" once it has been normalised and subjected to the hectoring and lobbying of a vocal minority. What gets set up with tight regulations one year, eases over time and what we would find abhorrent in this day and age will be perfectly acceptable in 5, 10, 20 years time. It is far easier to draw the line now and say that there are no circumstances where one person, or a collective, has the permission to take another's life, regardless of consent (which can be, in itself, a nebulous concept that could and will be disagreed over in the courts).	Other	I disagree with people taking the lives of others	Any bill enabling assisted dying would be the thin end of a wedge, the start of a slippery slope. Please look at what is happening in countries like Canada, where the MAiD programme is being used in ever increasing numbers for an ever expanding range of "conditions". It is heading towards a situation where if someone 'can't cope' they can go to a medical practitioner for some meds to end it. This is not humanitarian and caring, it is a cop out by all parties.
Disagree	Toxic culture within DHSC Failures in health care not addressed by Manx Care Inadequate home care provision Poor leadership and training of health professionals who are physically and emotionally drained and feel undervalued Lack of interest and understanding of health care issues by politicians and civil servants.	Not Answered		<p>It is madness to consider this now when health and social care services are in such disarray. In the current climate, people will be deciding to die because of the increasing inadequacy of health and social care provision.</p> <p>This survey is largely biased in favour of assisted dying and the questions assume that the reader already approves. It has been made public by the same people who have generated the chaos that now reigns within out ‘caring’ services. They should be ashamed of themselves</p>
Agree		Not Answered		
Agree	When ability to deal with ones personal needs has fallen to such an extent that dignity has been removed and there is no quality to continued life or pain levels can no longer be managed one should be able to elect to bring life to a close.	Not Answered		
Agree	People have the right to if they wish, it's their life.	Not Answered		As long it is done professionally with healthcare professionals and all the processes are followed this bill should be passed. People just committing suicide at home is not the same thing as assisted dying.
Agree		Not Answered		<p>I don't think 2 doctors are enough, involved has to be the GP or a doctor who has treated the patient for the condition that causes him wanting to die,then another specialist in the area and then another independent doctor, under no circumstances should be anyone allowed to have the medication at home,it should be in possession of the health care professional who is with the patient until he takes it. Otherwise somebody else can kill themselves with it or get killed...</p>

Agree	<p>We all deserve the right to choose to die with dignity, on our own terms.</p> <p>And not just someone terminally ill either; the options should govern someone living with any debilitating or degenerative disease where the pain or quality of life is such that the person would prefer to die, they should be allowed to request such.</p>	For over 5 years	<p>Some poorly worded questions and answers to be honest...</p> <p>For the avoidance of doubt I believe the medication, once the process has been approved, should be administered by a medical expert either in a clinical setting or at home. The person can then choose to surround themselves with whomever they choose.</p> <p>You can't risk life threatening medication being given out by prescription and then potentially misused.</p> <p>On the subject of the patient providing a written declaration, you have to have an option for someone who is unable to write at that point.</p> <p>The above questions are assuming the respondent is agreeing with the proposal to legislate for assisted dying and so when reading the responses it will not give a clear indication of peoples views.</p> <p>The questionnaire has clearly been compiled to support the proposal and looks at specifics within the Bill rather than gain peoples views on the subject.</p>
Disagree	<p>Morally wrong and very subjective regarding abuse.</p>	Not Answered	
Disagree	<p>We need to have an open discussion about death and allowing people to die before we assist people to die.</p> <p>There are too many unknowns in assisted dying for me to feel comfortable with the process.</p> <p>Prognosis is notoriously difficult to estimate. We all know of stories where people are told they have 6 months and are alive 2 years later.</p> <p>Conditions which in my opinion would be unbearable such as progressive neurological conditions or severe stroke the patient would likely be unable to take the medication.</p> <p>Some people might be fearful of being a burden and feel obliged to die.</p> <p>The 2 doctors deciding will be supportive of the process so in my opinion are unlikely to disagree.</p> <p>Who does the doctor refer to if they are a conscientious objector?</p> <p>Who will prescribe? Hospital doctor GP or specific assisted death 'specialist'?</p> <p>Will it be at home or hospital? Will a doctor stay with them? Do we have the resource for this? What if the dying process is prolonged and distressing?</p>	For over 5 years	
Agree		Not Answered	

Agree	Those suffering and /or near death with a progressive or terminal illness should have the option to end their own life at the time and manner of their choosing.	For over 1 year	Q17 - not sure, why not another doctor - then a psychiatrist!
			Q22,23,24 I think a drug that powerful should only be collected, handled and stored by a Doctor, never left at a persons property because all your safeguards could be ignored should, say, a patient change their mind but a relative decide to give it them anyway!!!
			Q25 - only a Doctor (not a generic health care professional) should be allowed to be with a patient once they have administered the drug to make sure they are comfortable. Obviously relatives & friends should be allowed in with the Doctor.
			Q27 - I don't think it should be included in a living will because it's a decision that should be made at the time. One might interpret the request differently should the patient be rendered say in a coma, families may argue that they want to let them go but the patient may have had a change of heart about assisted dying in the event of a catastrophic accident!
Agree	I don't want to linger on suffering with no quality of life , putting my family through a terrible time watching and feeling helpless to do anything about it.	Not Answered	At the moment we allow people to suffer for far longer than we would allow our pets to , which seems crazy to me .
Agree	You don't let animals suffer so why should people	Not Answered	
Agree	When nothing more can be done for me or I have dementia that stops me recognising my family I do not want to live	Not Answered	I want to be able to stipulate what I want while I'm fit and well and I don't want those wishes challenged or interfered with by anyone
Disagree	All human life is precious and should be cared for with dignity,until the end. Improved end of life care/palliative care should be invested in. Old and sick people are especially vulnerable.Any pressure that they may feel like a burden to family or services may impact their decisions making. As a civilised Island, this proposal is so sad to read.investment into our health and care systems needs to be improved,not wasting time on such detrimental legislation. Reading what has happened in other countries,like Canada, where this legislation has been passed is so horrific. Are we to follow the slippery decline in our value of human life as these countries?	Not Answered	As a health professional for many years,this proposal is so shocking and horrific to read. Caring for the sick and dying is an integral part of nursing. No one should be made to feel like their life is a burden or worthless,right up until their last breath. Dying is a natural process,that can be managed with the correct care,staff and respect that any civilised society should provide.
Agree	No one should suffer and not have a day in how they want to go.	Not Answered	

Agree	<p>The right to choose how and when we die is an ideal, that we would all wish for . In particular for those who have a clear vision of the type of death they face from illness and medical conditions or problems . Dying in pain or terrible distress should not be ignored . We know that pain cannot always be alieviated especially in cancer . Terminally ill patients should be given a range of choices especially as death approaches. A rational society should provide rational responses and plans available to all people who want to make decisions in advance of their dying . Just as we can decide on “No resuscitation” so we should be free as individuals to make decisions about how we choose to die . I choose to make that decision and would fully support assisted dying as required on the request of the individual under the listed circumstances ! I am in full support of assisted dying . We are in living an advanced and educated society now and with that we require assisted dying . The Individual must have the right to die with dignity.</p>	Not Answered	<p>I think we should pass this bill and that it will benefit the island if this law extends to non residents provided there is a control and overview in place . We can lead the field in this matter and it will give us a significant lead in this matter . It will come eventually for the uk but we can lead it ! Giving the island prestige and quedos</p>	<p>Personally I would like to be able to keep a script for medication that I can take privately and in the comfort of my own home, if and when I choose to die . I realize this is an ideal ! But it would be something I would seek, if and when, I receive a diagnosis that indicates I have to suffer seriously before my death. I would like to calmly plan my own death , as privately as possible, and not get dragged through the health system when needing help and assistance to die . However planning my own death is a right I expect and demand , if and when I know I am dying . Calm Rational decision making is what I want . I have watched both parents die and this is not peaceful , as someone gasps for breath until the heart stops or the lungs full with fluid . This takes about ten hours of death rattling ! Not pleasant to sit with someone suffering to die . Please stop this suffering . We don’t allow it for animals but people have to suffer ? This does not make any rational sense ! We continue to be dominated by old religious myths . If we care about people , we must bring this bill in to law with the stated protections of the law !</p> <p>Thank you to Dr Allyson for proposing this bill . He must continue to propose it , and keep doing so , till it goes through . It will definitely come in to law eventually .</p> <p>People will avoid talking and thinking about death , so health staff such as myself must keep pushing this bill . We know and have seen death in all forms and we must not dismiss this vital bill .</p> <p>Death can be awful for people and it’s more often not peaceful or a</p>
Agree	<p>It is cruel to stay alive when you want to go, are in pain and there is no hope. To die when you are ready in these cases is humane. Some illnesses are so bad that living must be torture.</p>	Not Answered		
Agree	<p>I have watched family members and friends die in terrible circumstances knowing they were terminally ill. We treat animals with more respect. It should be our choice to end our own life and to die with dignity.</p>	For over 1 year		

	Agree	I feel that nobody has the right to deny people autonomy over their own body. It's a very similar situation to that of abortion, nobody should be forced to endure a painful death on someone else's say so.	Not Answered		I think that just allowing it for the terminally ill discriminates against people who have incurable and often progressive illnesses which destroy their quality of life [MND, Parkinson's etc]. Being alive isn't the same as living and just existing with no quality of life is unbearable for some. In the case of diseases like dementia I think a living will, maybe a video stored with an advocate, should be possible. My mother suffered a long, slow deterioration from dementia and spent at least a year as a living shell. This was her worst nightmare and I was even tempted to think of ways to hasten her end as a kindness as she had actually suggested this when she was in her right mind. Every day I fervently hoped it would be her last for her sake. Obviously I couldn't do anything and watching her slowly unravel and die over 7 years took a massive toll on my own mental health including self harm. I have decided that if I have any chance of going the same way then I will find a way to kill myself before I become incapable of doing it and my brother feels the same She died 5 years ago and I still haven't dealt with the emotions. These diseases affect the health and wellbeing of the whole family and not just the sufferer. Religion should absolutely not affect any legal decisions. If religious people want to suffer an agonising death because their god expects them to then that's their decision which they should not expect to inflict on others. Religion should not interfere with the law of the land as many of us are non believers so religious beliefs are irrelevant to us. On the subject of people feeling they are a burden, I suspect very few families would encourage this idea just to get their hands on an inheritance. That's a very cynical view and would be impossible to carry out if assisted dying is properly supervised.
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Disagree	<p>1. It would encourage people from the UK to move the the island for assisted dying. During the time they would have to wait to become a resident, in order to qualify for assisted dying, they would need to be treated by the NHS for the medical condition leading them to seek assisted dying. This would burden the island's NHS capacity.</p> <p>2. Elderly or vulnerable adults, or people with mental health problems or lack of mental capacity, would feel forced to agree to assisted dying, in order to avoid being a burden on their family or on society. People without capacity, for example those whose family have power of attorney, would be pushed against their will into assisted dying, because the person with power of attorney could decide for them. Many younger members of the family would choose for their elderly family member with dementia to have assisted dying, so that they could get their hands on their money, instead of paying for a nursing home.</p> <p>3. The large doses of oral medication required for assisted dying are difficult to take, often cause vomiting, are often not effective in killing the patient and if they are, can take hours to work, before the patient dies.</p> <p>4. Many people seeking assisted dying in other countries, suffer with depression or other treatable mental health illnesses. Many who ask for oral assisted dying tablets, finally decide not to take them.</p> <p>5. I don't feel that medical workers should be killing their patients, even if it becomes legal to do so,, with assisted dying. Examples of ones who did are Dr Harold Shipman and the nurse Lucy Letby, both of which were sent to prison.</p> <p>6. In other countries where assisted dying is legalised, the safeguards do not work. With time, the safeguards are gradually watered down and the number of people eligible for assisted dying is increased.</p>	Other	Over 10 years	<p>I completely disagree with assisted dying in the Isle of Man and hope that the bill will be thrown out like the previous times. It would be a disaster for such a small community and open to abuse.</p>
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Disagree	<p>At present the law protects human life, introducing assisted dying legislation will undermine that.</p> <p>I have practiced medicine since the 1970s and been a GP on the island for 38 years, In that time I have been involved in the care of many terminally ill patients and over the years have seen the quality of palliative care improve consistently such that deaths associated with intolerable pain or other symptoms are now the exception.</p> <p>To change the law on the grounds of exceptional cases, I believe, makes for bad law.</p> <p>I have always enjoyed my role as a GP, getting to know patients, to diagnose their medical problems, to cure if possible and to treat symptoms if not. For a doctor to become their potential executioner when they develop a terminal illness would alter the relationship for the worse. Patients in extreme old age and those who are very frail , as well as younger people with severe disabilities ,sometimes make throw away comments about being a burden on the state and on their families. The suggested change in the law ,although initially intended for those with very limited life expectancy ,would inevitably put pressure on such people.to consider an option that they would not otherwise cross their minds. I would like to think such people should be valued for who they are rather than being given the option of being killed because they are of no value.</p> <p>Safeguards sound attractive but, depending on what you read, in other jurisdictions it would seem these have been rapidly eroded and the number of assisted deaths has increased rapidly. I have seen it said that in Canada assisted dying now accounts for 3% of all deaths.</p>	Not Answered	<p>The introduction to this survey seems very unbalanced and gives no mention of any down sides to the proposed legislation . The questions are framed such that it is inevitable the result will be announced as a majority in favour of assisted dying.</p> <p>As someone who fundamentally disagrees with assisted dying, I cannot answer most of the questions as they assume the correspondent is in agreement with the basic principle.</p>
Not Sure	<p>This is a very divisive issue which can be resolved by allowing to continue what is current clinical practice (although usually not made explicit). That is clinicians provide pain relief at the wish of the patient and/or their next of kin. The net effect of this can be a premature death, but it is crucially pain free, which is what everyone wants. That should continue and will will avoid the needless angst and divisions this issue has caused on our community.</p>	Other 3 yrs	<p>The onus should be on quality end of life care, not assisted dying.</p> <p>Although the net effect may be the same as assisted dying, end of life care and associated pain relief removes all the professional and emotional strain on all those involved (in my view). I appreciate the consultation exercise - thank you whoever took that decision.</p>

Agree	<p>My 80 year old mother had ill health for several years, and had a heart operation in 2016 which helped briefly, but the following year she had a fall at home and ended up housebound. She suffered many different ailments, was on a cocktail of medication and was becoming increasingly frustrated and miserable. It was heartbreaking watching my lovely mum disappearing before our eyes. Her whole personality changed. In June 2018, she was told that her heart medication had damaged her kidneys and she would never recover. She was delighted, thinking she was going to die soon, but unfortunately the doctor couldn't give a definite time scale. 11 long weeks later she finally passed. In those weeks she told me every day that she wanted to die. We had to wait until she was incontinent, losing her final scrap of decency, until the doctors were allowed to take her off her medication. Her final 3 nights were like a living hell. It broke my heart and 4 years on I still haven't fully recovered. My father was on antidepressants to help him cope.</p> <p>If we could have granted her wish to pass peacefully when she wanted, we would have done it straight away. This would have saved so much suffering and heartache for Mum and for our whole family.</p> <p>In 1985 I wrote a report at High School about how I believed in Euthanasia. I was 14, and based my report on my mum's experience of looking after my grandma for 4 years following a stroke which left her disabled. My grandma used to tell my mum every day that she wanted to die. I don't want to be saying this to my daughters in 30 years time.</p> <p>People deserve dignity in their death.</p>	Not Answered	
Agree	People should have freedom of choice when and where to die if they are terminally ill.	Not Answered	
Agree	<p>We each own our own lives and when life holds no pleasures and becomes unbearable should have the right to end it in a pain free and dignified way and this can only be done with assistance and medical cooperation. If a register was set up where people who agreed could sign and leave non signatures with the law as it is now, both could be satisfied. As to the claim that people might be coaxed into it, if a time limit of (say) 2 years applied before it became available for those not fitting your criteria, then anybody being coaxed would have ample time to remove themselves from the register.</p> <p>Answer to section 9 is limit would vary with circumstances from none to 2 years.</p> <p>There is also the possibility that if there were a path through consultation it may find and save unnecessary suicides.</p>	Not Answered	<p>End of life is inevitable so when negatives so outweigh the positives there seems to me no reason to 'sentence' a person to continue getting worse until no amount of medication can keep them alive.</p> <p>As for the stress on those that love the intended suicide, they are going to feel the loss whenever it comes. If it comes sooner they have less time to worry about it and less time to watch them suffering.</p>
Agree		Not Answered	

Disagree	The proposal is presented in such a way ,it’s not alone misleading but deceitful at the most vulnerable time of an individual’s life.	Other	I holiday there occasionally	I disagree with the proposal in its entirety. It’s written as though it’s already fait accompli which is deceitful and misleading the public . The proposed bill quotes various parts of the world that have adopted assisted dying without reference to the countless countries who disagree with it. This is clearly misleading . The sooner the legislation is introduced the better for all concerned. Assisted Dying should not be confused with Suicide as it is a completely different thing. Assisted Dying is more a kin to a Vet putting a terminally ill animal to sleep.
Agree	I have witnessed several family members die when only palliative care was available. Given the terminal diagnoses of their illnesses, if assisted dying would have been available they would have taken that option. However, because this option was not available they just refused further treatment until they eventually died.	Not Answered		
Agree	I have seen so many relatives and friends suffer unnecessarily towards the end of their lives.	Not Answered		Am concerned that the patient may not be classed as mentally able to make the decision by the time their suffering is unbearable.
Disagree	I think we should be concentrating on providing positive palliative care for people in this situation. I think the majority of people who would request assisted dying would be conscious of the resources allocated to caring from them and the distress they might see their family and friends going through. I do not believe it is possible to safely predict that someone has a life expectancy of around 6 months. I think the safeguards are not sufficient - what is the threshold for demonstrating coercion?	Not Answered		I would not dispute that some people would be very clear that they want to die in the the circumstances outlined in the proposal for the Bill. However, that is far outweighed by the number of people who would feel a degree of obligation to take this option rather than work with those dedicated to caring for the terminally ill
Agree	It allows people to have control over their condition and die with dignity and exercising their own autonomy. Palliative care can be brutally painful for some, humiliating to deteriorate on a daily basis and become confused and agitated as a result of palliative medication. Many people would like to preserve their identity before they lose it and this can be really important for families too. There is nothing more difficult than watching a loved one lose physical and mental abilities on a daily basis and there is nothing they can do but suffer.	For over 1 year		Whilst open to abuse, I think the genuine reasons and people who opt for assisted dying would far outweigh the abuse this system would incur. So long as all avenues of abuse are considered, risk assessed and mitigated as far as practically possible i think it should be considered as an option for Island residents to maintain their independence as long as possible and to maintain autonomy in their own life. I think many of the risks have already been addressed in this proposal and my only input might be that a health professional brings the medication to the home of the resident and certifies death to ensure that the medication is not abused or kept and not used and accidentally taken etc.
Disagree	I totally disagree with the principal of assisted dying for terminally ill persons on the Isle of Man	Not Answered		This is a very poorly worded questionnaire, if like I do disagree then the majority of the questions are not relevant but there is not tick box for that
Agree		Not Answered		

Agree	Everyone should be given the right to choose their death. Especially if they are dying and in pain. People should be allowed this fundamental control over their lives. There should be no limit as the control to make the decision should be the patients	Not Answered		A family member recently passed away from a terminal illness. Another family member has a terminal illness. Please give everyone the dignity to make their own choice If you don't agree that this should happen, don't personally choose it. But please make this legal so those who want this choice can. That is then fair to everyone. Please don't allow the dreadful suffering to continue.
Agree	There is nothing dignified or humane in allowing another person suffer when there is no treatment or cure available	For over 5 years		
Agree	Why should someone unnecessary suffer if there is no quality of life	For over 1 year		
Agree	Strong belief in people's autonomy and right to choose.	For over 1 year		
Agree	The decision whether to continue with or to end one's life should be considered to be part of the patient's healthcare journey and therefore subject to the same consent process as any other medical procedure.	Not Answered		
Agree	I believe it should be allowed due to the fact that the group of people we are talking about are no longer Living but Existing... the older people live and eventually become very ill they become once an adult but twice a child... Unable to move, unable to feed them selves, unable to go to the toilet themselves, unable to interject with others or society...we wouldnt keep a dog alive like that so why is it ok to keep a human alive like that its just wrong. Late stage dementia late stage motor neurone where we know at this time there are no cures the people suffering with these diseases if they could have an out of body experience for just a few minutes and see what had become of them then they wouldnt want to go on. Its not right that they have to either.	Not Answered		This bill needs to cover dementia patients as late stage means they wont be of sound mind so wont be allowed to die this is completely wrong and needs to be changed so the person with it can choose at what stage of the disease they want to go at. Also many illnesses like late stage motor neurone people can no longer write or even pick up a pen so could not sign a decleration of there own death again this needs to be sorted to allow them the right to die too.
Agree	I have seen my mother father and husband die without options. I feel that a person should be allowed dignity and choice.	For over 1 year		People should be able to have a control over their last days.
Agree	I have seen people suffer with no quality of life.	Not Answered	We could provide a service for others as they do in Switzerland.	
Agree	I have nursed dying relatives and they suffer and lose all dignity. If that was me I would not want to life that way, it's quality over quantity	Not Answered		It is long overdue
Agree	Every adult of sound mind should be able to keep their independence and autonomy over their body and mind. This includes when and how they would want to die. This is especially important if they are terminally ill or suffering, and no longer wish to prolong such pain.	Not Answered		If you allow a relative to pick up life-ending medication from the pharmacy on behalf on the individual requesting assisted dying, this should be made clear in law that it would not constitute assisted suicide (if assisted suicide remains illegal).
Agree	It is what I would choose for myself if I was in such a position. I would rather be able to choose to be assisted to die on the island rather than have to travel to Switzerland. I want the choice.	Not Answered		
Agree	Dignity and choice, why put people through such pain and sometimes humiliation. If a person chooses to shorten their life to prevent pain and suffering to themselves and others they should have that right. To be able to do so at home is important.	For over 1 year		if the person has capacity at the time of the decision, this can not be overruled by family or others. Respect the persons wishes.

Agree	<p>I have supported friends who are terminally ill. They all knew whether they wanted to die immediately or choose to fight. It is an individual decision.</p> <p>They all wanted the option to decide for themselves.</p> <p>I personally would opt for assisted dying.</p> <p>If I were unable to look after myself, mentally or physically . I would like to be given drugs to end my life</p>	Not Answered	<p>I believe everyone should have a ‘Living Will’ or an ‘Advanced Directive’. stating clearly their wishes for their end of their life.</p> <p>Written, signed and witnessed when they are sound of mind.</p> <p>I personally would hate to be kept alive if I was unable to care for myself. Especially if I had Dementia or Alzheimer’s. If I can’t recognise my family there would be no reason for me to stay alive, wasting NHS money on drugs which would not bring my memory back.</p>
Agree	Both my parents died prolonged, painful deaths.	Not Answered	
Agree		Not Answered	
Agree	<p>My mother died from inoperable brain tumours - fortunately, it was only two months or so from the diagnosis to her death. During her life she had always asked me to ensure that did not suffer if it ever came to it and to end her life if I could. This was after her own mother had suffered a year of agony and indignity many years earlier. The final 2 or 3 weeks of her life she was unconscious, hooked up to pain-killing drugs from a pump and I hope she did not suffer. However, this method of allowing a person to simply collapse from within struck me as unnecessarily cruel, especially as I'd promised (and failed) to help her when the time came. She was perfectly capable of dealing with her own affairs until a few weeks before she succumbed, writing and arranging her own funeral service surrounded by friends and family. If the option to choose assisted dying had been available, I know she would have chosen it. I am now 70 years old and would choose the same. It would be reassuring to have the option, please.</p>	Not Answered	
Agree	<p>Do not believe people should suffer unnecessarily. If there is no quality of life and no hope of getting better they should die with dignity.</p>	For over 1 year	<p>I think the questions could be simplified - I am aware of several people withdrawing from the survey due to the questions eg. Residency and timing. Each case will be different.</p>

	<p>Agree Having seen friends and family being very ill and after some time dying and not always in a comfortable way.</p> <p>I do not want to go into a care home but have control of how and when I die.</p> <p>My grandmother died in a nursing home at 94 my mother had cared for her, my mother had fallen and cracked her ribs so was unable to have her home. Grandmother used to tell me she was weary and just wanted to go to sleep.</p> <p>After Gran had died my mother developed lung cancer (none smoker) she also developed infected gall bladder and in considerable pain she was put on morphine which didn't help much she was told it was all in her mind when her condition was finally diagnosed it was beyond treatment and spent her final days in a hospice where she received exceptional care my father was devastated that she had suffered for so long,</p> <p>I also have had cancer ,if I was as ill as mum I want to be able to say when I had enough and have a quiet way out my family know how I feel, I have a D.N.R. Record on my medical records.</p>	<p>For over 1 year</p>	<p>It would be a reassurance to many people to know when they feel they cannot or want to go on living they can request assistance. I am 82 and had a good and fulfilling life and a few heartaches on the way so I want a peaceful ending.</p>
	<p>Agree It should be their choice. We are compassionate more for animals and their suffering than humans.</p>	<p>Not Answered</p>	<p>Sometimes with Dementia or Alzheimer's there should be the ability for the family to make a decision on end of life for the patient. Near the end of their time, it can be insufferable to watch your relative in pain and confusion - just because we think it is humane or right to keep them going. The patient is not living a life - more living a nightmare. With agreement of medical professionals, that there will be no improvement you should be able to agree a happy and peaceful path for their end of life.</p>

Disagree	<p>I disagree that assisted dying should be permitted for terminally ill adults on the Isle of Man.</p> <p>Firstly, it is an incredibly ungodly act to take your own (or someone else's) life, along with being a band-aid approach to current issues in today's society.</p> <p>I believe we should be taking a root-cause and proactive approach to helping society and by that I mean, focussing on encouraging people to live healthy lives with good nutrition and exercise. Helping lonely/anxious/depressed people with support networks and communities rather than chucking them on medication that again, is only a band-aid approach. Helping ease the strain, stress and pressure off every single human being on this island that is suffering with increasing food and utility prices.</p> <p>The list is absolutely endless of what we could do INSTEAD of letting people end their own lives.</p> <p>Life is a gift and unfortunately people experience incredibly traumatic and stressful situations in their lives which are then never dealt with and the individual isn't cared for properly. This is what then leads to physical and psychological issues that manifest as anxiety, depression and then snowball into a lot worse.</p> <p>I can't emphasise enough how many more things we could do for people. There is such a lack of care and humanity from the government to the</p>	Not Answered		
Agree	<p>If of sound mind and a terminal diagnosis has been placed upon the individual, I cannot comprehend the pain and suffering in the months ahead. The pain that the patient not only goes through but the suffering of the family seeing what their loved one will be going through never leaves you and overtakes the happy fond memories on a daily basis.</p> <p>Yes, it will always be difficult to say goodbye but to have sound of mind when making that very personal decision and to have the choice to rest in peace without the pain and suffering of drugs & sickness is only the most humane way forward for patients and families.</p>	For over 5 years	Assisted Dying I feel should only be implemented when no other drugs/intervention is available any longer and the diagnosis is terminal within a 12 month living time range.	
Agree	<p>People who are terminally ill know they will die soon and fear they may die in agony.</p> <p>We are striving to give person centered care to people from conception to grave and must honour those who can choose their death if it gives them a dignified death.</p> <p>Let people make the choice to die how and where they wish before their condition takes their capacity from them.</p>	Not Answered		

Agree	A person should have the right to choose whether they wish to go ahead with assisted dying. They are the ones living with that illness and are suffering each day, not anyone else. Why should anyone go through such a painful death when assisted dying could help them, and their family. It's hard on them. I watched my 21 year old son, my only child die from sepsis & pneumonia, it took 3.5 days for him to pass. It was painful for me to watch.	For over 5 years		Other than the person wishing to go ahead with the assisted dying inform direct family of their wishes. To avoid legal ramifications etc.
Agree	Because, as I know from personal professional experience, there are still limits to the effectiveness of palliative care. For someone who is terminally ill, I can see no justification for prolonging their agony and demeaning incapacity. Further, even where a patient is not suffering physical agony, once death is inevitable, a planned and dignified death is simply humane.	For over 1 year		Q17 Legal people also trained and able to assess soundness of mind. I would not limit it to psychiatrists (limited availability might prejudice a person's case). Q22 If no relative, then an appointed representative.
Agree		Not Answered		
Disagree	Investment should be made in high quality palliative care to enable a person to live out their life naturally as comfortably as possible.	Other	Don't support it at all	
Agree	You wouldn't leave an animal in pain or gasping for breath!	For over 1 year		
Agree	I had to watch my Mum endure pain and discomfort when we knew she was dying and it was a dreadful experience. She felt stripped of dignity and hated us having to see her so poorly when we knew she wasn't going to get better. As long as guidance is clear and well thought out there is no reason not to give people autonomy and choice.	Not Answered		
Agree	Seems logical sensible and correct if terminally ill. I do not want to suffer if I was terminally ill.	Not Answered		The drug needs to be monitored when being used so as to make sure it is being used by the correct person
Agree	It's important as a community that we should do what's best for all our citizens and I fully believe supporting those who are terminally ill or suffering from a debilitating untreatable disease in making choices regarding the end of their life is incredibly important in caring for our community.	Not Answered		I believe every case should be individual to the person who is seeking an assisted death to give them the best possible chance to choose the method & time that they see as best.
Agree	Whilst palliative care can be very good it can fail for some and prolonged terminal suffering is a terrible thing for anyone to go through and for any loved one to witness. We need agency over our own lives, it's not for any religious organisation to tell us we cannot choose to leave without putting our families, friends and health professionals in danger of prosecution. I think we should be treated as adults who can make decisions about our own lives. Obviously safeguards are needed for people who do not have capacity but to consign the majority to pain solely on concern for them is immoral. A robust and timely framework should be designed to enable people to decide for themselves.	Not Answered		

Agree		For over 1 year	I realise that it is not a completely accurate analogy, but many of us have experience of assisted dying for much loved pets. We do not take this decision lightly but do so in the best interests of the animal, to prevent further suffering. Veterinarians act with compassion and professionalism throughout.
			I would like to see the same compassion and choices for human suffering. I personally do not want to linger on in pain and/or a bewildered state and cause further suffering for family members and use vital healthcare resources where there is no prospect of a proper life.
Agree	Everyone deserves to die with dignity	Not Answered	
Agree	They should have the choice	Other 3 years	
Agree	It's their choice	Not Answered	
Agree	Because if the terminally ill can no longer live a normal life there should be no reason for them to suffer	Not Answered	
Agree	I believe nobody should have to live a life they don't enjoy, if they see no joy in their current state of life they should not be forced to live it.	For over 1 year	
Agree	If a person is terminally ill, i believe that they should be able to end their life. The quality of their life is not enjoyable	Not Answered	I believe it's the persons own decision and to legalize this will give people back there own independence and dignity in their death.
Agree	I believe that assisted suicide should be legal for terminally ill or hurt people, if they don't wish to live anymore and feel their circumstances aren't worth it or they're in too much pain that it should be their choice to pass away instead of living a long painful or boring life. I also think if assisted suicide is carried out that doctors should be careful it's not people who feel they should pass away because they are in care and that they feel like they're wasting people's time so they should go.	Not Answered	i think with the draft bill that people understand medication will cost money but should be somewhat cheaper then some place like in one country it cost 120k, that will most likely be put onto the family of the deceased which i think will cause more pain on the family and should be covered another way or be put cheaper.
Agree	So i feel as if the terminally ill should be able to choose because if you can choose to live you should have a choice to die too	For over 5 years	Let them have right to die
Agree	I have watched someone very close to me dying of terminal cancer. This person was suffering until the End of life. Just let me go was the words that still ring in my ears. Begging to Die. If they would have had this choice to decide how they go and when, knowing they are really going to suffer. They would have taken this option am sure.	Not Answered	

Disagree	<p>There is no need , as the hospice is efficient enough to handle end of life issues .</p> <p>In countries like Canada it has proven to be a disaster in that the vulnerable get talked into this by their families .</p> <p>Families have conflict of interest as the death of a poorly person might well benefit them financially.</p> <p>This will be a step in the wrong direction as it is not respecting life at all .</p> <p>Modern medicine has enough supportive treatments as not to bring forward death . No doubt .</p>	For over 5 years	<p>The questions are based on the assumption that the person giving their opinion is agreeing to assisted suicide or early death .</p> <p>As many questions don't have the option I don't agree it simply asks how do one think it should happen</p> <p>That's flawed in itself</p>
Agree	<p>I have seen the anguish that pain and suffering of loved ones can cause. I have seen humans in conditions that you would not leave an animal to suffer in. I think it is a kindness sometimes to end the suffering.</p>	For over 1 year	
Agree		For over 5 years	
Agree	<p>Yes, I believe that a competent adult should be able to request this and make what is a very personal decision. If someone feels that their quality of life has deteriorated to such a point that they are suffering and, having explored palliative care and any other options available, they have decided that they wish for this suffering to end. I would like to see this made available not only for those who are terminally ill, but for those who have suffered a catastrophic injury (eg becoming quadraplegic) or have a severe life-limiting condition.</p>	Other	<p>This is one area that I am not sure about, as I'm not sure that we necessarily want to become a destination that people from elsewhere visit in order to die. Having said that, I believe that this option should be available to anyone who wishes to have the autonomy to determine that they wish to end their life due to unbearable suffering. Whilst it is preferable for people to be able to choose to die at home and not have to travel in order to do so, this option may not be available to them in their country of residence.</p> <p>As per my initial comment, I feel that assisted dying for those who are terminally ill would be a good first step, but I would like to see assisted suicide made available to those whose suffering has become unbearable due to a severe life-limiting condition. I personally would like to have an option of including a provision in a living will, which could be drafted carefully according to my own personal preferences - for example, if I were to suffer a catastrophic accident leaving me severely disabled, or if I were to have severe dementia, to the point that I am not aware and no longer have capacity, i would prefer not to continue to live in such a condition, potentially for years. I know this is often said, to the point of being a cliché, but i think it is true that we sometimes afford greater consideration in respect the suffering of animals than we do to our fellow humans. In certain circumstances, I think it should be for me, and me only, to determine the manner in which I die - and I would like to be able to die with dignity.</p>
Agree		Not Answered	
Agree	<p>I believe that this should be offered to competent adults. My husband's last two weeks having palliative care at the Hospice were not ideal and an ordeal for both of us.</p>	Not Answered	

Agree	<p>1. If an animal was terminally ill and in pain you would be classed as cruel to keep it going so why shouldn't people have the same right</p> <p>2. no-one wants to un-necessarily put burden on their family</p> <p>3. most terminally ill people get to a point where they've had enough and want to go, so why not grant them their last wish</p> <p>the length of time put on it would have to be case by case because everyone is different as are various illnesses, and why they find out about it</p>	Other	<p>depends upon whether they were ill before moving here or not as this would suggest moved here simply for the procedure so in that instance i would put over 5 years on it, but for those resident here prior to illness it would be case by case for the reasons i previously stated</p>	<p>I think it could be dangerous to allow persons or their relatives to collect it from pharmacy because if they decide not to take it there is a possibility that it could be used by another either on themselves or someone else - it needs to be done under medical supervision eg administered by medical professional, whether that be at the person's home or hospital ward to ensure the correct person has taken it and prevent anyone taking NHS to court for wrongly administering</p>
Disagree	<p>ethically and morally wrong on so many levels. This is not in any medical professionals remit. Open to abuse and loopholes, safeguarding measures are not infallible . Too upsetting to even contemplate this happening</p>	Not Answered		<p>Most of the Q's are steered towards providing an answer if the person completing the survey agrees to this proposal, therefore not applicable for me to complete i.e this "law" should not even be on the table for consideration.</p>
Disagree	<p>We enter the world on a date we don't choose and we should leave on a date we don't choose that's the circle of life. Each individual is a unique person a gift to our parents from our creator who has determined the length of our natural life.</p> <p>On the next question you've structured your biased question not to allow people to express an alternative answer this is a poor survey! How about letting a terminally ill person live until they naturally die but with pain free palliative care and having loving family and friends with them.</p> <p>Question 12 should have a button I don't agree with Assisted Dying therefore this and the next question about residency would not apply</p>	Other	<p>we should not offer assisted dying at all but look after people who have a terminal condition to ensure they are comfortable and pain free and allow nature to take it's course.</p>	<p>Questions 15-27 wrongly assume that the person completing the form agrees with assisted dying and there is no recourse or alternative answer provided therefore a strong and wrong bias is towards approval of the bill. This is not democratic but evil. It was the same with the Abortion survey no alternatives view options to the questions.</p> <p>Another of Dr Death's evil schemes to ruin the Island and the sheep who follow bleating with liberal voices will his next bill be to enact "The Purge" once a year on the Island.. I'm sure that also would get support from his liberal crones.</p> <p>Life is precious, and a gift from God to parents, in fact each person is an individual in the image of our Creator, with potential to know God and do good but we are from a fallen heritage and need to seek salvation through Christ, the free Gift from God.</p>
Agree	<p>Citizens should have the right to decide how they will die.</p> <p>Being artificially kept alive by machines and drugs is rarely dignified.</p> <p>Seeing a loved-one deteriorate over a few weeks can be very distressing - spending many hours by their bedside and then not knowing whether they will pass away in the few hours that you need to be away from them.</p>	For over 1 year		
Agree		For over 1 year		<p>I do not fear death but I do fear severe pain, severe disability, dependence on others for daily functions. Death is inevitable for every living creature, there is no point prolonging this beyond a reasonably pain-free life. Assisted Dying bills fail because parts of society cannot face the harsh reality of the severe suffering endured by some.</p>

Agree	My ex mother-in-law was diagnosed with motor neurone disease so new that without committing suicide her only option was to eventually drown in her own saliva after years of suffering. Rather than be able to spend maximum of her time left with her family she had to commit suicide whilst she was fully able to do it herself- and without telling anyone - so noone else would be charged with assisted murder. If she'd had a choice of when she could die (when she couldn't cope anymore) then she could have said a proper good bye to the family after spending any number of years still with them. Her life was cut far shorter than it needed to be and it was a horrible way to die and led to suspicions of whether others were involved in what was an unnatural death. She never would have wanted that.	Other	It would depend on their connection to the island. If all their family here it would be different to someone who'd never visited	With many illnesses a person is able to make decisions in advance that they would not be capable of making/communicating later in their illness, I think - particularly in terms of a terminal illness - this should be allowed
Agree	Having witnessed my mothers 3 yrs living a motionless bedridden life from Progressive Super Nuclear Palsy in unbelievable pain . It was more than my father or me to comprehend why she had to endure a long tortured 3 yrs when no one would have have allowed a family pet suffer in this way . She should have had the right , which was her wish to pass peacefully much earlier than she did	Not Answered		
Agree	With the full safeguards in place, yes terminally ill people should be allowed to die how they choice, if they wish to. This enables some people to die in a supported and dignified manner.	Not Answered		I do think that none residents should be able to do this providing all the same measures / guidance is followed
Agree	I feel if it's an illness that drastically reduces their quality of life or are in such pain that will result in death they should have a choice. Strict controls are a must.	For over 1 year		I agree with assisted dying in the right circumstances. However the medication should not be allowed to be "out in the public" or stored at home. This could result in accidental deaths if someone else takes it or gives it to someone else.
Agree		For over 5 years		It should be administered in a controlled setting with a healthcare professional who brings the drugs.
				I believe when given approval for assisted dying the individual should have to wait 30 days til they have it so they have a "cooling off period" Also only got IoM residents to avoid assisted dying "tourism"
Agree	We have been extending this dignity to animals for centuries.	Not Answered		
Agree		Other	The test should be their intention to be resident, for example moving here then receiving a life changing diagnosis. The dignity should not be denied by chance.	

Disagree	<p>After reading the proposed bill/consultation I strongly and whole heartedly believe this piece of legislation is extremely damaging for multifaceted reasons. Firstly, the general public are being mislead to believe that 'assisted dying' is to relieve suffering at end of life, this bill seeks to assist an individual to commit suicide. The language and terminology throughout this bill is peppered with inaccurate and misrepresentation. Secondly, the consultation is suggestive that there are an abundance of individuals whom suffer at the end of their life's even before the dying phase occurs, the multi disciplinary professionals involved in a patients care needs always seek to mitigate this suffering and the bill seeks to dehumanise health services. Thirdly, as a registered nurse, working in the community with over 50 patients on my caseload with life limiting illness and disease and as a qualified District Nurse I can safely say that those who wish to end their lives in the first thought are often joyful and blessed with many years spent surrounded by family, family events like births, weddings etc that otherwise they would have not been apart of and go onto entre the dying phase with the knowledge that NO health professional wether that a District Nurse, Hospice Nurse a ward Nurse or a GP would allow suffering. I believe this is a grave mistake and a mistep towards loosing the health service I love, the patient's I care for and the families who will inevitably have a considerable amount of greif, potential post traumatic stress disorders and also highly likely a mass loss of health care professionals who vowed as per our codes of conduct to do no Harm. This is quite literally the end of compassionate and empathetic care and the beginning of a society which seeks to end anything that presents challenging, instead the government and its constituents should be focussing on resources to promote better quality end of life care for those l'm terminal phases or facing a rocky road ahead</p>	Other	<p>I disagree on 12.13and 14 but there is no option to.</p>	<p>Please see my comments from the first question. I again, find this questionnaire difficult to assert my strong opposition to this.</p> <p>As a community health professional, I have in-depth experience and first hand accounts of the types of pharmacy errors that are scattered throughout this consultation there is grave gaps for severe error here and that is alarming that this has not appeared to of been communicated to the public.</p> <p>The language throughout is extremely my misleading there are members of the public who believe this bill is for administration of just in case medications, standard end of life care and palliative support. This bill is the opposite of what we achieve right now, with the Manx population.</p> <p>There have been risk over many years with standard medications for end of life being kept in houses of the patients to receive them, the drugs being stolen, the drugs going to the wrong house, getting into the hands of children. This is Pandora's box, opening it would be catastrophic in nature and the unconscious knock on effect would be felt by the professionals being asked to do an unethical act to a patient which is against their code of practice and conduct. As a member of the public, I believe we are being mislead and misguided. The consultation is flawed with inaccuracies and bias opinion, based off of counties who are aiming to dehumanise health care, cut cost and desensitise their population for the sake of ideological politics. This is a crime against humanity and if this bill passes, I forsee many families, friends and health care worker alike suing the government in blindly letting this piece of legislation pass to make the island 'fit' or</p>
Agree	<p>My mother in law had motor neuron and it was a horrible thing that she went through. My mother had dementia and she always said to never let her be put in a home and loose her dignity. Well in the end she knew no one and sat in a room just staring. I have also told my children I do not want to be like that. If I get it I will end my life</p>	Not Answered		
Agree	<p>Everyone should be given the option of choosing to end their own life if they so wish. It's and individuals choice and the persons dignity should be considered.</p> <p>No one would wish to see a person have a long and painful death that so often happens.</p>	Not Answered		

Agree	Mentally competent persons with terminal illnesses, or illnesses that are not terminal but cause years of pain and suffering, should be allowed the ability to choose to die with dignity. Whilst there have been incredible advances in keeping people alive and extending life, the quality of that life must also be taken into account and where the person decides that THEY have lived as long as THEY wish to given all the circumstances then THEY should be allowed to make the decision on how, and when, THEY die, subject to the safeguards built into law.	Not Answered	<p>There should be a short, maximum time for doctors to complete all the assessments set in law, including where a third opinion is needed.</p> <p>This cannot be as and when it can be fitted in around holidays and other commitments. Those who wish to die with dignity should not be made to wait for unspecified periods of time for permission to do so.</p> <p>Ideally there should be a dedicated team.</p> <p>Q22 - Collection of prescription by patient or relative - suggest by a medical professional and delivered to the patient, properly secured in transit - patient may be unable to attend pharmacy, what is a 'relative' and what protections are there for the patient against the 'relative' collecting but withholding the prescription, for example, to apply emotional blackmail to not take the drugs, against the expressed decision of the patient, or for financial gain; another concern could be the potential loss of drugs during transportation between the pharmacy and the home of the patient.</p> <p>Question 24 - should medication be returned to pharmacy straight away? - this assumes that the person has made a final decision not to take medication prescribed and delivered - they may change their mind, for the time being, at any given point, but this does not mean that they have changed their mind altogether. If they have made a final decision not to take the medication, then should there be a process whereby the doctors who approved the prescription of the drugs are notified of that decision and they can then collect and return the medication, making sure that the person has not been pressurised into changing their mind? Safeguards again for the patient</p>
Agree	No one should have to endure the pain and indignity that can accompany a difficult end of life when the outcome is inevitable.	Not Answered	
Agree		Not Answered	
Agree	Having witnessed the distress and trauma many terminal diseases cause for the individuals concerned, and the complete hopelessness loved ones feel when they can't help with the suffering, it is only humane to give a responsible individual the right to choose to end their life on their own terms.	For over 1 year	
Not Sure	If someone feels that they truly have no other option but to die then they should be able to choose how they pass.	For over 5 years	
	But on the other hand; life is very precious and isn't something that could be ended so quickly without an after thought. We are lucky to be alive and just because we may be sick doesn't mean that life should be taken away.		
	I have seen loved ones suffer and don't want them to be in pain but in the same sentence I don't like that they can consider life to not be precious and be so wasteful with their life.		
	There is an issue with coercion and some people may not be of sound mind to make the decision themselves and may be pushed into dying by their family for reasons such an inheritance etc.		

Not Answered	I've seen to many family members go through to much suffering and not wanting to carry on. It's so heartbreaking that there is nothing they can do about it . It should be freedom of choice.	Not Answered	
Agree	If terminal should be able to choose if to end your life as an individual	For over 5 years	It is down to the individual to.choose and they should sign to agree and noted in a will and not to overuled by anyone else.
Agree	Someone should not have to suffer if they are incapacitated or living with an incurable disease knowing they and/or their family would have to watch them slowly deteriorate	For over 5 years	I also feel that there should be an option for people who suffer from a mentally debilitating disease that have no control anymore over bodily functions should be allowed to have it written that the family can assist them if they have power of attorney or receivership
Agree	Freedom of choice, my life my choice for all those that have the capacity to make and informed independent decision.	Not Answered	
Agree	After watching a dear family member dying in pain for over a year with terminal cancer.	Not Answered	
Agree	Both my parents died of cancer. They were of sound mind. Once they became bedridden and reliant on morphine they wanted to die. I would want the same myself.	Not Answered	
Agree	I personally know that if I was diagnosed as terminally ill I would consider this option. I also have elderly parents who would fully support this on the Isle of Man should they be diagnosed as terminally ill.	Not Answered	
Agree	I've witnessed many of my patients and relatives become very very sick for years, with no hope of recovering. Every day is agony for them and many of them have said they wanted to die but couldn't. Extremely heartbreaking for the family's too	For over 5 years	We make the decision for animals so people should be able to decide too
Agree	Everyone should be able to decide when they have suffered enough and die with dignity. Our life so therefore should be our choice	Not Answered	I think people should be able to 'plan ahead' by writing a living will which states their wishes should anything happen in their future, i.e they get dementia, or any other brain related illness that would stop them being able to make the decision at the time. I for one would sign something to say I would not want to live with dementia, having watched my father die a slow painful death is not something I wish my own children to have to go through, the grief of dementia is horrendous, grieving for someone who is still alive is heartbreaking and I don't want my children to go through what I did. I, personally would like to make a choice whilst I am still mentally able to. I would not want to live in a world where I have forgotten my own children, the damage this does to them is never ending. People should be able to state in writing 'My wishes if I get dementia' and if that wish is for assisted dying then it should be allowed to take place. Everyone deserves to die with dignity, dementia has no dignity. Dementia has no survivors. We should be able to make the decision for assisted dying whilst we are still mentally able to and incase we need it.
Not Sure	It would depend on the perimeters of the bill/ rules. Based on the ones published currently, I'd be in favour.	For over 1 year	

Agree	Having watched some family members suffer so much and also be resuscitated against their wishes, I truly believe that we should all have the option to make the decision for ourselves. Also, I suffer from several lifelong illnesses, not terminal but very life limiting and constantly painful. If at any time I feel that I cannot cope with the constant pain, the medications cannot control the pain, and my life becomes unbearable then I think I should be allowed the option too of assisted dying.	For over 5 years	
Agree	My mum was terminal with cancer of the bowel and other areas. She was in so much pain for such a long time. You would never let an animal suffer the way she had to suffer. The UK hospice she was in worked so well for her, but over a month in permanent pain is no way to treat a human who was never going to recover. If you have watched a person die of cancer, then you would also agree to assisted dying.	Other	Have family living on the island. If the person who wants the assisted dying process would like a doctor to administer instead of family, that must also be added into the bill.
Agree	Suffering is mere existing and not living. Illness's take life away, slowly. Having a choice to end your life should be an individual's decision and for those that can't make this decision should also have someone that can make that decision for them.	Other	Anyone should have this choice A person should also have another person that can also take this decision for them if they are not mentally capable ie. Alzheimer's sufferers
Agree	We don't put our beloved animals through pain so why should we put ourselves or loved ones through it? I believe in self-determination and feel a person has the right to choose their own way of life including the ending of their life.	Not Answered	I think this can be extended to those with long-term conditions that restrict quality of life. They may not die from them soon but if a person doesn't want to live due to severe quality of life restrictions then this choice should be available to them. Too many see this as a way of 'killing off' individuals but my view is similar to that of termination: it is all about choice and empowerment. Just that there is availability doesn't mean it will be taken up in droves but what it does offer is respect and appreciation that a person has the right to choose their life and its end. A living Will is also needed as we all know someone with dementia and the comments have been - she/he would have hated to be like this. . . . Also I think Samaritans should be an organisation that is suggested for support they are there 24/7 and are simply there to listen Thank you for bringing this to Tynwald. The IOM can be a forerunner in respect and care of the dying as well as the living
Agree	I watched my Mother suffer for 12 years. It was horrendous.	Not Answered	Please pass it. I am not sure that it is necessary for two Doctors to be involved. I think one Doctor would suffice.
Agree	If I was in such a position I would like to choose when I died and not suffer a prolonged, painful and pitiful death.	Not Answered	
Agree		Not Answered	
Agree		For over 5 years	
Agree	It's the only humane thing to do - nobody should suffer because modern medicine can defer their ultimate death	Not Answered	
Agree	Providing they are of mental capacity to make the decision then someone who has a terminal illness should be able to make their own mind up when they have had enough pain and suffering	For over 5 years	As previously stated

Agree	I believe we should all be able to have a CHOICE of how & when we leave this planet. I also believe that keeping someone alive only benefits the healthy living person who sadly believes they have this ‘godly’ right to make decisions over the person who wants to die with dignity. This is not acceptable to override a persons choice if they want to die with dignity.	Not Answered	Please do not think people take this decision lightly but if they have please allow people to make this choice if that is what they wish. I always believed we have choices in life so why would you take this choice away ?
Agree	I have witnessed people that were friends and family dying horrible, painful deaths, and more so as a health care professional. I personally do not want to experience it first hand and I would prefer not to witness it again.	Not Answered	This should be a personal choice with appropriate safeguards. We need to bury the ghosts of the past and move on. If it's a family pet and it is suffering, it is humanly put down. I wish the same humanity for my future self and others
Agree	If someone is suffering and in pain they should have the choice if this is something they want to do.	Other	They should allow anyone to come for this choice
Disagree	I am opposed to bringing in assisted dying in the IOM. The experience in Canada offers us a warning what can happen. Canada insisted that assisted dying would only be allowed in rare cases and that they would not follow the slippery slope and avoid the expansion of assisted dying as seen in Belgium. 7 years after the introduction assisted dying is now being extended to vulnerable people - disabled, depressed, poor and even minors. In 2021 3.3% of all deaths in Canada were from assisted dying - hardy rare. The experience in Canada, Belgium and the Netherlands proves that safeguards will not work and that once the door has been opened it will never be shut but will be pushed further. Life is a gift from God and we have no right to take it away. We should be spending our time and resources into improving palliative care. Anyone who has been with a loved one at the end of their life in Hospice will know what a "good" death is and this should be available to all.	Not Answered	Health care workers should not receive any financial reward for providing assisted dying
Agree	Having seen a relative and a friend suffer from extreme illness (MND and MS) I feel it is only proper that we allow these people the right to make a personal choice.	For over 1 year	I feel it would have been more appropriate to have the bill titled "End of life choice bill". The bill should also allow provision from a living will from people who do not wish to live if they they develop Alzheimer's or dementia or are in a vegetative state.

Disagree	<p>First thing: do no harm</p> <p>Second: legalisation in parts of europe has moved to children (Belgium and Holland)</p> <p>Third: Horrendous slippery slope in Canad</p> <p>Four: general wish not to be involved in this by GPs and palliative care specialists</p> <p>Five: people use the law as a moral pendulum so legalising assisted killing becomes "a good idea" with pressure from family, personal circustances to do this.</p> <p>Six: better spend time and money fully funding palliatve care</p>	Other	<p>Where there is no "disagree" option I have ticked the least worst option - hope this isn't misued as support for that option</p>	<p>The questionnaire is badly worded in that sometimes I disagree entirely with the proposal (e.g. life expenctancy question) but there is no option to say that I totally disagree. I wasn't sure whether to choose the least worst option or "don't no". What I wanted to say was "disagree altogether</p> <p>As a doctor I have come across greedy relatives who want to keep patient in hospital so "their" inheritance doesn't get eaten up by care home costs. Human nature means that people will be pesuasive again to their financial gain and the ill relative will think it's their responsibility not to spend this money.</p> <p>Morality of sactity of life bein erroded gradually at both ends of the spectrum. Is this world only for the fit and healthy now?</p>
Agree	<p>To allow dignity and quality of life.</p> <p>We treat animals with more respect than humans at present.</p>	For over 1 year		<p>Assisted Dying should be available to people with dementia, provided they have signed a living will whilst mentally competent.</p> <p>The suffering of people with no quality of life as a result of disease like Alzheimer's can not be allowed to continue.</p> <p>Everyone I know says 'I don't want it to happen to me that I just become a vegetable' yet the politicians won't take the necessary steps for fear of political and religious backlash.</p>
Agree		For over 1 year		
Disagree	<p>Life is precious..even unto the very end. This will open a can of worms and will be a slippery slope into unscrupulous tactics possibly from members of family who wish to 'clear' the way ahead on inheritance issues. Sadly there are definitely people who will not hesitate to use is as such.</p>	Not Answered	<p>I haven't agreed to any of the above because I don't agree to assisted dying.</p>	<p>All of the above questions are to be answered on the assumption that I agree with assisted dying..which I do not.</p>
Agree	<p>There is no need for anyone to suffer at the end of life.</p>	Not Answered		<p>This bill is for people to be able to end or have their suffering ended in a clinical and humane way. There should be no scope for unrelated or uninvolved people to interfere in any way, publicly or privately.</p>
Agree	<p>As a young woman I watched my grandmother die in terrible pain with cancer. As a Registered Nurse now in my 60's, and despite the amazing advances in palliative care, it it still happening. Assisted dying is working in many other countries, and it can work on the Isle of Man, so that we too can put the wishes of the terminally ill and their families first.</p>	Not Answered		
Agree	<p>Your life should be your choice.</p>	Not Answered		
Agree	<p>I have witnessed several members of my close family dying from cancer, and although they received exfellent palliative support, some of their symptoms could not be controlled or alleviated in the terminal stage.</p> <p>I believe everyone should have the choice to access assisted dying if their own personal situation became unbearable in these circumstances. It would give many peace of mind and improved quality of life if it was an available option.</p>	For over 1 year		

Agree	Assisted dying can not only reduce pain & suffering, but also gives control to the person. I have worked in the care of older people, and during my career, I sat with many people as they died. In a few occasions, this happened during the night, when family members had left, having been sitting with their loved ones for many hours. Being able to choose to die, with their loved ones present, is something I believe should be allowed, if that is what the person wants.	For over 1 year	<p>1. If the person themselves must administer the medication, then we should provide 'assistive technology'. For example, a health care professional could set up a machine that can administer the medication intravenously, that a person with very limited mobility could 'trigger'. This would need to be individually tailored, such as a fine 'trigger' for someone with very limited mobility, or 'Eye Gaze' (similar to Professor Stephen Hawking's communication tool), so that a person with Motor-Neurone Disease can access Assisted Dying, or, a large 'button' to hit, for someone who lacked fine motor skills, such as a person with advanced Parkinson's Disease.</p> <p>2. I recognise that 'capacity' is covered by the proposal, and feel this is very important. I strongly support Assisted Dying, but only when capacity is clear. Therefore, while an advanced directive should be taken as an indication of a person's views, capacity would still need to be established. Therefore, I can't think of any situation where an advanced directive would be used to support a decision, as, by definition, the person can only have capacity affirmed, if they are able to communicate their understanding. However, it may be a useful tool to demonstrate that the individual had not been coerced. Perhaps this requires clarification?</p>
Agree	Everyone should have a say/some control over how they die, if at all possible, for peace of mind/planning for self/family	Not Answered	<p>I was surprised by the number of 'not sures' I used as I feel strongly this should be available to all, including non-residents, however some statements/questions will involve a lot of variables for consideration per situation so 'not sure' is about considering those variables</p>
Agree	We have no choice about being born we should have a choice on how and at what stage we are to die if terminally ill	For over 5 years	
Disagree	It would undermine the important balance between personal autonomy and societal responsibility, and cause unacceptable risk to vulnerable individuals and groups.	For over 5 years	
Agree	Currently we treat sick animals much better than sick humans	For over 5 years	
Agree	It should be up to the individual to decide if they wish to end their life, if such becomes unbearable because of pain and suffering. These wishes should also be recorded, in case the individual should suffer from dementia or Alzheimer's and has made their wishes clear in such a time as there are fully corpus mentis, they may wish to end their lives to end their suffering and to spare their families the anguish such an ailment can bring. This procedure should not only be available to terminally ill patients but also to those suffering from other illnesses and are presenting the wish to end their lives .	For over 5 years	<p>It should be done in a kind and understanding manner without prejudice, without causing unnecessary upset to the individual, not a drawn out process that will cause grief and anger to the individual and their families.</p>

Disagree	<p>Assisted Suicide is wrong on the following grounds.</p> <ol style="list-style-type: none">1. It devalues human life made in the image of God. (Genesis 2.7)2. It encourages death as a reasonable solution to suffering and pain. The Bible described death as an enemy and gives hope in the life to come. (1 Corinthians 15:26)3. The Lord Jesus Christ came to defeat sin and death on the cross and rose from the dead on the third day. He alone give hope to all who are suffering or dying, that he is the resurrection and the life and all who believe on him, have the promise of eternal life. (John 11:25)4. God is absolutely sovereign and only he has the right to give or take life. We do not have the right to usurp his authority.5. Governments are given delegated power by God to rule, and therefore they are to rule in accordance with His laws. (Romans 13: 1-2)6. To present His Majesty the King with a Bill requiring Royal Assent that is clearly at odds with the Gospel, is to cause him to breach the Coronation Oath Act 1688. "I will to my power cause Law and Justice, in Mercy, to be executed in all my judgements. I will to the utmost of my power maintain the Laws of God and the true profession of the Gospel"	Not Answered	<p>The consultation is biased towards Assisted Suicide and is worded in such a way that it is being considered as a reasonable thing to do. I do not agree with this proposal on any grounds and it is a disgrace that the Isle of Man Government are even contemplating such legislation, which flies in direct opposition to the Courts of Heaven. The best advice to the Legislature is to repent and believe the Gospel.</p> <p>If this Bill become law it will open the gates from a right to die to a duty to die. So called safeguards are "Red Herrings" to push through this legislation to appease those who are unsure. Countries where similar legislation has been passed as developed quickly. For example in the Netherlands the key criterion "unbearable suffering" is interpreted more broadly than was originally proposed. In Belgium the laws in 2002 concerning euthanasia was restricted to adults, but in 2014 was extended to include children. In Canada euthanasia was legalised in 2016 but as already scrapped the requirement for a person to be terminally ill and will extend it to mental illnesses in 2023. So called safeguards provide so safety at all and this legislation will quickly accelerate to include anyone who decides their life is "not worth living" That would be a chilling development and no doubt in time this would include those under 18.</p>
Agree	<p>I'm manx living in the nederlands from 1990.</p> <p>In 2008 my 1st husband got cancer</p> <p>My 1st husband died in 2019 and yes we had everything in place for him to choice to die. We were talking about the date as he was very sick and within 2 days he died ❤️ of a heart attack</p>	For over 5 years	<p>My new husband and I have both agreed to sign up for this.</p> <p>I believe that it is everyone right to decide what to do with the end.</p> <p>My only son age 27 died in August 2015 hè had autism and borderline he killed himself he told me some time he can't even get through the hour. So yes I would of loved to be with him on his death I saved him 5 times from death.</p>
Disagree	<p>It is gravely wrong. This is a slippery slope and I urge you to reject this.</p> <p>Please protect your loved ones by rejecting this.</p>	Not Answered	<p>Please do not allow this.</p>
Disagree	<p>I am concerned that the criteria may well be changed at a later date.</p>	Other	<p>I don't agree with assisted dying for any resident</p> <p>I found this consultation confusing really. If I don't agree with assisted dying then why did I need to answer the rest if the questions?</p>
Agree	<p>It is cruel to leave people suffering</p>	Not Answered	
Agree	<p>Choice. People in terminally ill or life limiting illnesses should have the option to choose how they die. They did not yet the choice to be affected by illness but they should have 100% of options in treating including the option to end their own life to prevent suffering.</p>	For over 1 year	
Agree	<p>Why let people suffer unnecessarily? If we were told our pet was in pain and terminally ill we'd be given the option to end their life to end their pain.</p>	Not Answered	<p>I don't agree with making people wait a period of time just in case they change their mind. It's prolonging the suffering for everybody involved. It wouldn't be an easy decision to make in the first place so if they have decided they are ready, then let them be.</p>
Agree	<p>Dignity and the right to choose</p>	For over 1 year	<p>Dignity and the right to choose</p>
Agree		For over 5 years	

Agree	With the correct vetting and support it is my choice as to whether I decide to end my life.	Not Answered	No
Agree	If life becomes unbearable because of unbearable pain I would like to be able to end my life through my own doing without burdening another person with the act. If I'm not in the position to do it myself I would welcome the help of another party.	Not Answered	
Agree		Not Answered	
Agree	Standard reasoning as set out by many people and organisations with regard to ending pain dependency no quality of life etc etc	For over 5 years	
Agree	Terminally ill individuals and those having to endure unbearable suffering should have the right to decide when and how they die.	For over 5 years	
Agree	I value individual autonomy and choice.	Not Answered	I do think that 'the limit of life expectancy' is hard to establish for some terminal illnesses, such as Alzheimer's. Compared to, say, a person with cancer, a person with Alzheimer's may continue to live but with no quality of life, as they incrementally lose their cognitive faculty. Thus, I am concerned that a strict 'limit of life expectancy' regulation (e.g. six months, 12 months, or even longer) may exclude some people with Alzheimer's who wish to opt for Assisted Dying while they are still lucid to make the decision, simply because their life expectancy cannot be medically ascertained. In sum, I think 'terminal illness' needs to be defined more broadly and flexibly. Not all terminal illnesses affect the person's cognitive faculty. Furthermore, life expectancy cannot be established clearly for all types of terminal illnesses. I think the Bill needs to engage with this important fact about the different types of terminal illnesses.
Agree	Autonomy: if an individual of sound mind requests medical assistance to die because of intolerable suffering, there should be safe, legal assisted dying as part of healthcare.	For over 1 year	Eligibility for assisted dying should be assessed on the individual's own judgement about their quality of life. The person should have mental capacity at the time of the request and at the time of death, except in exceptional circumstances. The Canadian MAiD is better than the Oregon legislation; it is decided on the condition causing suffering, not on how close the person may or may not be to death. Assisted dying is a healthcare matter: the courts don't have to be involved. Canada and Spain both have compassionate systems. Victoria, Australia, has made it a criminal offence to persuade (or dissuade) someone to request assisted dying - a good protection against coercion. I support the Isle of Man's Bill to introduce, safe, legal assisted dying. With Scotland and Jersey also considering reform, England and Wales must follow on.
Agree	No person should be forced to endure pain and suffering. Personal choice is a human right.	For over 1 year	No extra comments.
Agree	People should have the right to chose to end their lives with dignity and free of suffering if it can be shown they have a terminal illness or a condition which would render their quality of life so poor that it would be cruel to try to force them to prolong it.	Not Answered	

Disagree	I do not agree with the policy of Assisted Death under any circumstances. It is the tip of the iceberg, to giving anyone who asks for any reason to die. It is akin to assisted suicide. Health care costs are out of control everywhere and politicians aren't prepared to find a solution to the problem. They have found an alternative, offer people the option to die. You quote Canada as an example, they are offering people the death option if they are depressed or in financial difficulties, rather than get them help. Many feel that they have no real choice. They offered a woman who needs a stair lift the option to kill herself instead. They are now looking at offering children the option to die. I wouldn't be surprised if the politicians cleared the city streets of the homeless by offering them the death option. It is no surprise to me that Dr Allinson proposed the Bill; a physician who also proposed legalisation of drugs and fewer restrictions on abortion. And this from a supposed physician who is supposed to be committed to saving lives. It is also a huge burden to put on other medical staff who are committed to caring for their patients, not suggest they kill themselves. That is happening in Canada where hospital staff are suggesting that pathway for patients as an option to expensive health care. Assisted suicide was passed into law in Canada in 2016. It was modified in March 2021 to change the eligibility and procedural safeguards and the Federal Government's framework for the collection of data and reporting regime. The numbers of people dying this way are over 10 thousand per year and rising. In Canada "You do NOT need to have a fatal or terminal condition to be eligible for medical assisted death". In March 2023 patients who suffer only from mental illness and who meet all the other criteria will be able to qualify for medical assisted death. Will they understand what is happening to themselves?	Other	Does the `Isle of Man want to be known as a destination to die?	I strongly object to the Bill.
Disagree		Not Answered		
Disagree		Not Answered		
Agree	I believe in the freedom of choosing	For over 1 year		
Agree	Having experienced watching my sister and mum both die from terminal illness, I found it beyond what any person should be put through, I spoke at length with my sister when she was really ill and the pain she was in, even through the nurses tried there best to make her comfortable. My dad has also had dementia's for 8 years and has suffered he made his wishes clear to me, unfortunately my dad is no longer in a position where assisted dying would be allowed, due to him no longer being able to communicate	Not Answered		

Agree	Nobody should live in pain, if quality of life is compromised and reliance on others is total - anyone old enough to understand the full implications of their illnesses and life expectancy and equally quality of life should be able to make the choice and decide when enough is enough.	Not Answered	<p>There were a number of poorly worded questions and the available answers did not allow me to give an accurate answer to the question that represented how I actually felt - for example Question 9 - option of 'No' should have been on the list.</p> <p>Question 19 - should have said 'provided that the person is capable of signing' - if they aren't their living will should be relevant or if they should have a medical proxy who makes the decisions with the same options.</p> <p>Re collecting the medication from the pharmacy who should be able to do it - it is difficult to decide how the process should work - should it not be administered by a physician? Possibly - the follow on question answers also depend on what the process is for the collecting, administering and monitoring of the use of the drugs provided. You need to define a proposed process - then people can comment more appropriately.</p> <p>I am very pro choice in terms of assisted dying - the process definitely needs to be worked on but I 100% agree with the principle and should I ever be diagnosed with an illness for which I will never recover or be in considerable unmanageable consistent pain - I would choose to die. I will be including a comment in my will to ensure that my loved ones know that this is my choice should I be unable to make my own decision.</p>
Agree	Being aware and observing family members end of life and the pain they were in. I feel people should have the opportunity to assisted dieing if it is their wish.	For over 1 year	I think it should be a health professional collecting the drug from pharmacy
Agree	Terminally Ill people who have absolutely no quality of life are in a conscious state of absolute misery. Not being able to look after yourself, lack of mobility or communication sounds like a jail sentence.	Not Answered	
Agree	To end the 'suffering' - their own wish. We 100% know it will result in a painful and slow death - it is a no brainer. We need to give everyone a choice.	Not Answered	
Agree	We wouldn't want to see our pet go through it so why humans!	For over 1 year	We should allow people to chose to die with dignity if they chose.
Disagree	The ruling could be abused relatives could encourage the ill to accept the termination of their lives due to pressure from their relatives	Not Answered	

Disagree	<p>The Lord gives and the Lord takes away.</p> <p>The wilful taking of human life, for any reason, at any stage of its course - from conception to natural death, is fundamentally anti God. This is an objective fact, whether everyone thinks it true or no one thinks it true.</p> <p>Suffering in this life, united with Christ’s suffering on the cross, is the stuff of eternal salvation, whether everyone believes it or no one believes it.</p> <p>Palliative care is the pathway.</p>	Other	Never	Don’t do this. It’s objective, fundamentally, morally wrong
Disagree	<p>Life is so precious and should be protected at all times without exception.</p> <p>Our job is to nourish the principle of life and certainly not to extinguish it.</p>	Not Answered		Assisted Dying is a misnomer for Assisted Killing and should be properly described as such.
Disagree	<p>Assisted dying poses many social and ethical problems as well as issues relating to human rights. I am very much against this practice.</p>	Not Answered		
Disagree	<p>It is open to manipulation and coercion and when someone is in such a fragile vulnerable state they may feel a burden to others and that there is no other choice.</p> <p>We should be looking at caring for these people rather than killing them.</p> <p>No one on this earth has a right to take life not even of their own. Only God has this right and by offering this suicide you are Condemning people to an eternity of suffering in hell.</p> <p>Surely the it is not morally sound to think that it's better to end someone's life because it's easier rather than to ease their suffering until its their time.</p> <p>When people have the option to choose assisted suicide; more than likely most will chose this not of their own desire but to not burden family or they will be convinced this is the right option when they are too vulnerable to think clearly.</p>	Not Answered		<p>It should never be allowed not in any circumstances.</p> <p>There was no mention of providing extensive religious help either:(</p> <p>The medical profession have a duty to save or preserve life...not take it</p>

Disagree	<p>While I respect the arguments for assisted dying, I believe that they are outweighed by the potential for harm.</p> <p>Sadly, vulnerable people would feel pressurised to take up assisted suicide.</p> <p>I am a doctor, and know that some patients who are thought to be terminally ill, in fact respond remarkably well to treatment and live for many years. It would be tragic to think that some of them would have their lives ended just because of an inaccurate prognosis.</p> <p>It would harm the doctor-patient relationship. I value the fact that my patients know that I only have their best interests at heart, and will do what I can to improve their quality of life and their survival. If assisted suicide were legal, patients could then suspect, rightly or wrongly, that they were being encouraged to die, in order to ease the pressures on the health system.</p>	Not Answered	<p>I believe that the term Assisted Dying is misleading. It could equally apply to palliative care. I believe that Assisted Suicide is a more accurate term</p>
Disagree	<p>There are many reasons I beg to differ and disagree. I would strongly suggest looking at the disaster happening in Canada and the obligation assisted dying has placed upon people who want assisted living. I don't understand the urgency being placed on getting this legislation through, there are I think 3 ongoing at present across the British Isles! It really comes down to what kind of society we want, one which values human life or one in which it becomes reasonable to commit suicide. The question I am always surprised is never really asked by the proponents of assisted dying is why? They state intolerable suffering but don't ever define it. They state for people who are in pain, but as a palliative care physician I know we can almost always control that. They state it is a matter of autonomy but instantly want it for dementia. The truth is dying is scary, but this should be compassionately discussed and treated, not pre-empted out of fear. Please please deeply consider the inevitability you will have the result of aiding suicide in vulnerable people. My advice is to wait, and see how Canada (a very similar nation) transpires. I strongly believe this will be the scandal of our time.</p>	Other	<p>I note a lot of the questions posed here are all under the understanding that an assisted dying - (suicide) bill is going to happen and is working out the specifics, this is upsetting as forcing me to miss questions as opposed to the ability to answer them.</p> <p>I am opposed and believe this to be a disastrous idea and a pushed misplaced ideology and is going to be a massive scandal (thrice or more than the LCP) in the coming years. It is about enabling suicide on criteria in which everyone appeals to equality. Why should a physical illness get access when mental health does not, or I am 17, why restrict to 18 + etc. A choice to suicide progresses to a 'right' to suicide and progresses to an 'obligation' to suicide very quickly. As evidenced by Canada. Even Oregon's own statistics outline 52% feel a burden when they undergo assisted suicide!</p> <p>Tell me why ? Tell me what you are frightened of? We can work through it.</p>
Agree	<p>No quality of life for the terminally person nor their family</p>	Other	<p>I think it should include any terminally ill person outside of the IOM</p> <p>There should be a place like the Hospice so they can prepare for their death to make it easier/smoothen for their family or at their individual home, witnessed or administered by a Health Care professional eg Doctor.</p>
Disagree	<p>Once permission is given for certain specified cases, the door opens wider. And the marvellous hospice movement is really providing dignity in dying.</p>	Other	<p>Doesn't matter: it should not be an option.</p> <p>I don't think there should be a draft bill.</p>
Agree	<p>This is required for dignity and to stop unnecessary pain and suffering. We do it for pets that we love to help them, but at present this cant be done for humans. I have had to watch my father die a slow and painful death, which he (and we) would have liked to avoid.</p>	For over 1 year	<p>Thank you for doing this</p>

Disagree	I believe that palliative care should be given and more funding given to help administer that care. I have seen what this care can bring to the person who is terminally ill. God releases us from this earth when it's our time.	Not Answered	n/a	I don't believe that anyone should be assisted to take their own life.
Disagree	It should not happen that any action should be taken to purposefully terminate life at any stage	Not Answered		The proper care given to dying person is to alleviate pain and give personal care at all times. They should not be deserted in their hours of need.
Disagree	Because I am a Christian, a medical doctor and I believe that we all need to trust God who alone can terminate our life on earth. I have a life-threatening condition and I am on the 'wait and watch' category. having had 1 round of chemo almost 3 years ago, which brought me back from the brink of death. I did get depressed and wanted my life to end - had such a law been in place, perhaps I would not be able to write this response? I am sure I could have found 2 doctors to approve of my terminating my life. My daughter-in-law also fought to keep her mother alive. The doctors advised turning off the life support, but my daughter-in-law stood firm and her mother came out of the coma and lived another 2 years, enjoying her grandkids and other family members. She was also a Christian and was happy to be denied entrance to Heaven for 2 more years! My point is that patients can still get better against medical opinion! (just don't get me started on the lack of training of the young doctors we have now, compared to my own).	For over 5 years		Just that doctors can give wrong diagnoses and are very bad at prognoses. My diagnostic skill was better than most and I saw some patients dying because another doctor made a different diagnosis and mis managed the patient. Two doctors can improve the situation as long as they are truly independent of one another and not close friends. I am sorry for patients with neurological issues or extreme pain as well as their families, but assisted dying is fraught with legal issues as well as doctors fallibility.
Disagree	Historic legal and medical protections guard against intentional termination of life for ALL people. These protections must be maintained. The various aspects of personal suffering which lead to the pressures of pro-euthanasia and assisted suicide campaigners need to be met holistically, and can be. All my future tick box responses are governed (when the structure of the question makes it possible) by this absolute prohibition. Hence the only possibly valid option is sometimes 'Not sure'	Other	No medical killing of any one from any where	Rejecting the whole principle and any possible practice means that no process details need be considered
Agree	We don't leave animals to suffer in pain, and humans should have the right to choose to die	For over 5 years		
Agree	It should be up to an individual to decide that they wish to die with dignity and without prolonged suffering.	Not Answered		
Disagree	Many people who are depressed or very ill are not fully of sound mind because of their pain but there are many instances of those who recover from severe illness who are so pleased they are still alive	Other	I oppose so called 'assisted suicide	
Agree		Not Answered		Doctors should not be able to opt out of the process because they are only being asked to confirm competency. However they could opt out of actual administration of drugs.
Disagree		For over 5 years		

Disagree	<p>The experience of what has happened in Belgium The Netherlands and Canada demonstrate that once legalised a number of changes to the safeguards take place and children, the mentally ill and in some cases the unwilling are being euthanised. We have an excellent reputation in this country for the standard of palliative care we offer and we are world leaders in palliative care there is no need to make these changes.</p>	Not Answered	<p>As already stated we have the evidence of what is currently taking place in Canada, Belgium and The Netherlands where there are very worrying trends in terms of forcing people to opt for euthanasia, assisted suicide, many families in these countries have raised concerns about how and why these procedures have been carried out and there are cases of those with dementia, severe depression and other non terminal illnesses being euthanised. Proper consultations have not been carried out despite legislation that requires this to happen. We have in the UK had cases of members of the medical profession ending their patients lives without their consent should euthanasia/assisted suicide be legalised it may be very difficult to bring cases against these people. The role of doctors in ending their patients lives will dramatically change the relationship between doctor and patient and place an unbearable burden on doctors who will be forced to carry out these procedures. Ultimately there are very few people who actually ask for their lives to be ended however they are given a very high profile this actually skews the the public perception of the need to change the law which in fact appears to work well in practice. We should be spending money on supporting those who are at the end of life providing comfort and pain relief not killing them. End of life care can and should be excellent and mitigate the need for euthanasia/assisted suicide.</p>
Disagree	<p>I work for the NHS as a Speech and Language Therapist. I work with adult neurology patients in the community and am against euthanasia and assisted suicide because this will have a devastating impact on palliative care services. Resource is likely to be heavily diverted to ethical decision making around assisted suicide (which is a quagmire at best) at the expense of good palliative care for the majority of patients. Effort should be made to improve palliative care services and managing pain relief. I feel changes to law will result in a serious deterioration in quality of care all round. I believe in good palliative care, not 'taking life' and would not be happy to continue practice if laws are changed.</p>	Other	<p>I disagree completely with assisted suicide for any age group</p> <p>Changes to the law will bring nothing but a quagmire of (un)ethical decision-making resulting in fundamentally poorer health care all round. Canada started off saying it would only apply to certain groups and have systematically increased it. e.g suicide due to poor mental health.</p>
Disagree	<p>I do not believe any safeguards are lasting or 100% failsafe, I believe they are eroded through time, e.g. initial strict safeguards on abortion are now at the point of not only being abortion on demand but being offered for no reason even when the woman neither wants nor has asked for an abortion. I would prefer more effort and funding be put into achieving optimum palliative care for everybody. I worry that assisted suicide will go down the same path as abortion and eventually it will be offered to non terminally ill people who will be seen and made to feel that they are a burden</p>	Not Answered	

Disagree	<p>When the Abortion Act 1967 was being debated, we were told that it would be very limited in its application. We should all be very well aware of what has happened since that time and that what we now have is abortion virtually on demand. The same thing will happen should the right to assisted dying become law, regardless of the effort of the finest minds to try and convince us otherwise. Eventually, and probably sooner rather than later, the elderly and infirm will be selected for death by way of intimidation, coercion, fear of being burdensome and even deliberate misinterpretation of the law, with some being selected on the basis that they are unfit or unable to make the choice for themselves.</p> <p>We are deceived if we have been persuaded that the unnatural ending of life in order to alleviate suffering is a caring act. To truly care is to do all in our power through palliative care to compassionately relieve that suffering. Should assisted dying become law then it will provide the means for a subtle reintroduction of capital punishment. It will further provide the means whereby those infants who have evaded the screening for disabilities can be eliminated when they are born with so called defects. I am further concerned that there is a significant hidden economical agenda surrounding this matter.</p> <p>Some supporters of assisted suicide will be greatly satisfied if a Bill of this nature becomes law in any shape or form because they will be only too aware that it will eventually be amended to suit their aim of death on demand.</p> <p>In conclusion, it is impossible to safeguard and guarantee the rights of those who are vulnerable in attempting to enshrine in law, the so called rights of some persons to kill themselves, or be assisted in such action, and who it must be stressed, are a tiny minority compared with those who are</p>	Not Answered	<p>When the Abortion Act 1967 was being debated, we were told that it would be very limited in its application. We should all be very well aware of what has happened since that time and that what we now have is abortion virtually on demand. The same thing will happen should the right to assisted dying become law, regardless of the effort of the finest minds to try and convince us otherwise. Eventually, and probably sooner rather than later, the elderly and infirm will be selected for death by way of intimidation, coercion, fear of being burdensome and even deliberate misinterpretation of the law, with some being selected on the basis that they are unfit or unable to make the choice for themselves.</p> <p>We are deceived if we have been persuaded that the unnatural ending of life in order to alleviate suffering is a caring act. To truly care is to do all in our power through palliative care to compassionately relieve that suffering. Should assisted dying become law then it will provide the means for a subtle reintroduction of capital punishment. It will further provide the means whereby those infants who have evaded the screening for disabilities can be eliminated when they are born with so called defects.</p> <p>I am further concerned that there is a significant hidden economical agenda surrounding this matter.</p> <p>Some supporters of assisted suicide will be greatly satisfied if a Bill of this nature becomes law in any shape or form because they will be only too aware that it will eventually be amended to suit their aim of death on demand.</p> <p>In conclusion, it is impossible to safeguard and guarantee the rights of</p>
Disagree	<p>There are a many reasons. Here are a few. There is no way to prevent internal pressure to 'do the right thing' to preserve an inheritance for children. The sufferings of the terminally ill are on average far less intense than those of the able-bodied well who suffer from deep depression, but you are not suggesting that their suicides should be assisted. The arguments used are identical, uncannily so in their emotional manipulation, to those of the moving film of the thirties, Ich klage an, Nazi propaganda to pave the way for the euthanasia programme. The examples of Holland, Belgium and Canada show that the 'slippery slope' argument is borne out by hard facts, e.g. a woman protesting No no being forcibly euthanised in Holland because she had at an earlier date expressed a will to that effect, and desperate people in Canada being presented with assisted suicide as an alternative to awful living conditions. And so on.</p>	Other	<p>All their lives</p>
Disagree	<p>All life is sacred. Assisted suicide is a slippery slope and leaves terminally ill people vulnerable to having their lives ended prematurely. We need better end of life care .</p> <p>We will become an uncaring society where we terminate lives on demand, as is the now case with abortion.</p>	Not Answered	<p>Slippery slope !</p>

Disagree	<p>I am very concerned about legalising assisted dying on the Isle of Man. The legalisation of assisted dying fundamentally changes the nature of the relationship between doctors and their patients. Doctors can now offer assisted dying, instead of doing all they can to alleviate suffering and preserve life. Some doctors will see the offer of assisted dying as an easy option. Others will in conscience not wish to involve themselves in assisted dying and legalisation of assisted dying will create problems for them. Sadly, the universal experience of countries that legalise assisted dying is that it becomes normalised and that the boundaries and safeguards are persistently eroded. In Canada, now over 3% of all deaths are by euthanasia. People are offered euthanasia when they request treatment for PTSD or ask for a wheelchair ramp. People have been euthanised because they are poor, with no actual physical condition. The Isle of Man would be well advised to steer clear of ever legalising assisted dying given the path down which we know this leads. The vast majority of palliative care doctors agree that assisted dying should not be legalised. The Isle of Man should prioritise palliative care and other support over offering assisted dying.</p>	For over 5 years	<p>It would be very dangerous to allow lethal drugs to circulate in people's homes. There are also concerns about coercion which are not addressed in this consultation. Another concern is how financial considerations may well come to affect this practice and how often it is offered to patients. There are so many problems with legalising assisted dying that I very much hope that the Isle of Man will decide not to do it.</p>
Disagree		Not Answered	<p>1 safeguards inadequate</p> <p>2 Most people in the UK still do not access palliative care. Must now have a concerted campaign for at least a decade to let the public appreciate and value the potential of early palliative carethat is the new pro-active type of EARLY palliative care that is only now becoming commonly available and appreciated in the uK and internationally . This new innovative approach can prevent many people feeling hopeless and lonely, and in pain and suffering because they understanding the likely course of events better. Prevention is better than dying</p>
Disagree	<p>Assisted dying in other regimes has led to vulnerable people feeling they ought to ask for or accept it. It has led to less respect for the value and life of older, iller people. On rare occasions assited dying has been undertaken without proper request or authorisation.</p>	Not Answered	10 years
Disagree	<p>i consider it immoral to assist anyone to die. it is not up to us to decide if and when a person should die.</p>	Not Answered	

Disagree	<p>The expression "terminally ill" indicates that the person is not expected to be healed/cured of the condition that would lead to the request. However, there are two simple facts that need to be considered:</p> <ol style="list-style-type: none">1. the excellent palliative care provision throughout the UK that may permit a person to die, naturally, without unnecessary pain or discomfort, and that allows loved ones an opportunity to be better prepared for the inevitable decease of the person involved;2. the continuing research and development of new treatments, for so many medical conditions. Who is to say that a viable treatment would not be discovered within the expected, natural, lifetime of the person involved?	Other	30 years. This would ensure that even someone born on the Island is less likely to be pressured by others to take such an irrevocable step.	<p>Having seen the manner in which proclaimed "safeguards" in this area have been, and are being, whittled away in other countries in which this deliberate taking of a life has been legalised, I have no confidence in any such legislation being sufficiently robust as to ensure that this would not happen in any country, or dependency, that might decide to introduce it.</p> <p>There is also the distinct possibility that some - especially, but not confined to, the elderly - could be pressured into ending their own lives by others who stood to gain, in a number of possible ways, from their deaths.</p>
Disagree	Life is Life and no one else should make my decision, and anyone else could have ulterior motives. (I am 87)	Not Answered		
Disagree	<p>The Right to Life is a basic human right accepted by most advanced nations. Some nations which have introduced Assisted Dying (thereafter AD) have demonstrated that the parameters for those cases have slipped over time from terminal illness to include disability and mental health. An example country here would be Canada.</p> <p>AD undermines the doctor-patient relationship and causes doctors particularly directed by the hippocratic oath or its variants taken by them at qualification and confirming that they will do patients no harm.</p> <p>A nation is judged by how it treats the most vulnerable, and so Palliative Care has been developed over time in most situations. More funding and development of these services would make AD redundant and unnecessary.</p>	Other	Over 10 years	<p>The proposals do not take into account important issues such as emotional coercion, financial gain by third parties/families and conscience rights of individuals.</p> <p>The "slippery slope" argument is relevant when looking at AD developments and their pace of change in other countries.</p>
Disagree	Individuals will likely feel pressure (perhaps from themselves) to opt for assisted suicide to avoid being a burden on friends, family or society, and this may resourcing affect those who are less affluent for whom financial costs of care may be more significant. We should strive to be an inclusive society in which all feel valued and included, and this will undermine this.	Not Answered		<p>I object absolutely to Assisted Suicide, but feel that, if it is to be available, a private consultation with a legal professional should form part of the process for an individual before it is authorised to provide an alternative form of check.</p>
Disagree		Not Answered		
Disagree	<p>The term 'assisted dying' is misleading - probably deliberately. We are talking about assisted suicide.</p> <p>Besides the principle of the morality of helping someone to kill themselves, evidence from places that already practice this show that 'safeguards' rapidly become eroded.</p> <p>The sick and isolated can feel pressured not to be a burden on relatives and society.</p> <p>And I wouldn't want to consult a doctor who was prepared to abuse his role of healer.</p>	Not Answered		<p>Most of the questions above assume that one agrees with assisted suicide.</p>
Disagree	This policy, whilst introduced with the best of intensions, just opens a scenario, the results of which, in the long term are terrifying. This is a move to remove from society the responsibility of caring for the vulnerable, and passes the decisions to medical practitioners. Its a cynical move to get rid of those who may present a medical challenge.		For over 5 years	

Disagree	<p>My experience as a Hospice Chaplain is that, when terminally ill patients are asked what they want to pray for, 85% want 'a little more time.' 10% want 'to be taken soon.' 5% can't answer.</p> <p>Assisted dying provides for the 10% at the expense of the 85%. 100% have to have the option. 100% have to be given the decision. But for 85% the decision is burdensome. They want a little more time, but wonder if they are being selfish. Each day they have to wake up thinking 'Today I could ask to end it all...' This mental anguish should not be inflicted on the majority by the minority.</p> <p>Tony Benn was asked if assisted dying would have helped when his wife was dying of cancer. He pondered. Then he said 'I'm glad we didn't have the choice.' He was, and is, far from alone.</p>	For over 5 years	<p>The detailed questions on how to provide assisted dying seem to exclude those of us who want no assisted dying, so cannot express an opinion on a situation when assisted dying is allowed. This consultation is therefore skewed in favour of those who want assisted dying. It would have been better if only those who want assisted dying were asked the questions about the detail.</p>
Disagree	<p>As a doctor I know how difficult it is to define who is terminally I'll</p> <p>In every other jurisdiction where such legislation has been introduced it has become increasingly permissive</p> <p>It puts tremendous pressure on the elderly and frail who do not want to be a burden on their families</p> <p>It is a disincentive to improve terminal care</p>	Other	<p>I disagree with your fundamental premise</p> <p>Unable to answer many of your questions because I disagree with your fundamental premise</p>
Disagree	<p>Every life is precious until natural death.</p>	Other	<p>I believe assisted dying is wrong.</p> <p>I do not believe that assisted dying is ethically moral and in my 40years of nursing those dying I can honestly say that I have witnessed very few people dying in agony. Symptoms can be anticipated and removed or reduced in order to aid the person to die with peace and dignity.</p> <p>Every human being deserves the very best of care in their final days however long the process may take.</p> <p>The phrasing of the questions in the survey do not allow people to express their opposition to assisted dying.</p>
Agree	<p>It is what I would want for myself</p>	Not Answered	

	<p>Disagree</p> <p>I work as a Clinical Support Worker, looking after the elderly. I am only too well aware of the vulnerability of the elderly, and I would hate to see doctors having to discuss Assisted Dying with patients, since it would inevitably lead to adding huge pressure to these people to end their life. They would feel that they are a burden to society, and that the best thing that they can do would be to die, and so remove that burden.</p>	<p>For over 5 years</p>	<p>I think that forcing doctors and institutions to ask patients about Assisted Dying is unethical. Doctors are only there to heal people, and should not be put in a position where they could lose funding or their jobs because they take an ethical stance and refuse to ask questions on Assisted Dying.</p> <p>Looking to others countries which have already gone down the Assisted Dying route, there is always a slippery slope which occurs. The initial regulations are quickly replaced with ones which are slacker, so allowing more and more people to become eligible to be asked whether they wish to die. Death rates due to Assisted dying then increase year by year, as more categories of eligible people are added.</p> <p>I think that palliative resources should be increased, which offers a pain-free natural ending to their life. Doctors don't always get it right when they guess how long a patient has to live. With one of my relatives, the doctors got it wrong by a factor of 6.</p> <p>People have a great deal to offer, especially to their families, even when they are very ill. They can be blessed with great knowledge and insight which can be passed on to the younger generations. Dying a natural death allows a better opportunity for family members to get used to the fact that someone is dying. It affords a chance for even families who live far away to come to pay their last respects. This is very important to their well-being, as they may have things which can only be said while their family member is alive. Not saying what is on their heart can cause life-long remorse and regret.</p>
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Disagree	<p>It is dangerous to create a loophole in homicide law to allow people to help vulnerable individuals to commit suicide. There is no 'safe' way to help someone kill themselves. The best safeguard against abuse is the law forbidding the assistance of suicide. There is no need for assisted suicide, as attested by palliative care experts. As has been found wherever assisted suicide has been legalised, the 'safeguards' which enabled the passage of the law are swiftly discarded, as it is argued that children, the mentally ill and those who are not dying should 'benefit' from it. In Canada, assisted suicide is offered for those suffering from poverty and housing problems. From being a last resort for those suffering intolerably, it has become a first resort. The disabled are at particular risk, as there is no cure for our conditions, and also the elderly - there is no cure for age, apart from death. Once the idea that death is the answer to suffering, who can withhold this 'cure' from whoever wants it - and those who are not sure that they want it will have their worst fears confirmed when doctors agree that they should qualify. I myself am disabled, with multiple health problems. To someone like me, who is struggling to survive from one day to the next, the continual debate about assisted suicide/euthanasia is extremely depressing. It took me 10 years to obtain a diagnosis, entirely through my own efforts. I have met uninterested doctors, sarcastic doctors and downright nasty doctors. I have absolutely zero confidence that I could trust any doctor who was not fully committed to saving life/improving life for the sick. Many people favour assisted suicide because they have heard tales of people 'dying in agony' from the campaign for assisted suicide; however, if this campaign really believed that people were dying in agony, they should demand better care for them, rather than capitalising on people's fears of poor treatment to further their campaign. I have zero confidence that such people could be</p>	Not Answered
Disagree		For over 5 years
	<p>Legalising assisted suicide would be a disaster waiting to happen; however, once legalised, it would be very difficult to reverse, because killing the vulnerable rather than caring for them is so much easier (for everyone else) and of course cheaper. The best and safest approach is to retain the legal protection that is needed much more by the weak and vulnerable, rather than opening the door to their killing. While presented as purely an option for such individuals, by virtue of their weakness they would be in danger from the callousness and self-interested motivations of those who are stronger and fitter than them, who would benefit from their deaths, either financially or being less burdened by the duty of care, or both. I cannot sufficiently emphasise the dangers of introducing such a system - indeed, I do not have to, since we need do no more than look at those jurisdictions that have already gone down this route. Introducing such an arrangement, even as an option, would also reduce the necessity of seeking new treatments. Indeed, had it been introduced in those times when treatments were primitive or non-existent, they would never have been developed, since there would have been no incentive to do so. It seems baffling that now, with much better treatments and care available, and palliative care for those who are in the dying process, we are hearing increasing calls for deliberate killing of the sick. One is forced to conclude that the very cost of the treatments/palliative care is the major driving force behind this campaign.</p>	

Disagree	<p>I profoundly disagree with the principal of assisted dying, and recognize that this consultation requires a response not just from those who live on the island but all who may be affected (and on behalf of those who don't have the ability to speak out for themselves).</p> <p>I believe that, once the genie is out of the bottle, there will only ever be greater pressure to broaden the criteria for eligibility to assisted dying - and that it would require an extremely courageous government to ever reverse the whole policy, something I believe would be very unlikely in the foreseeable future.</p> <p>If anyone in my family were in the future to be receiving end of life care following such a change in the law where they were being cared for, I would not be able to rest assured that doctors would always be seeking to care for them, and would be concerned about the possibility of institutional bias towards affirming an expression of interest in the possibility of assisted dying, not least because of financial reasons and resource constraints. And of course while there is a difference between affirming such a desire and actually promoting assisted dying, I would longer term be profoundly concerned about the possibility of doctors in the future doing so - potentially to vulnerable patients.</p>	For over 5 years	<p>I am profoundly concerned about the possibility of people being able to obtain lethal medication from pharmacists. If the intention is to maximise freedom of choice, I believe that in at least some cases the medication would not be used immediately and could lie unused in someone's home for a period of time while they hesitate and grapple with the issue of whether they dare use it - indeed the patient might die anyway having hidden the drugs.</p> <p>Hence I am deeply concerned about them being found by anybody who might later occupy that person's property (including children) - and that it could lead to tragic consequences.</p> <p>Pharmacists must also have their freedom of conscience respected if they want to have nothing to do with assisted dying at all and not to ever dispense such medications.</p>
Disagree	<p>I helped my mother and another relative who both experienced protracted end of life palliative care, in difficult circumstances. This experience reinforced my belief in the shared responsibility we all have to help each other face up to challenges and suffering through life and in death. I believe that we need more palliative care at the end of life and better community support through life.</p> <p>I believe that the experience of other countries (most recently Canada) tell us that attempts to regulate and limit access to assisted dying will not survive challenge using equality law precedent. From countries where it has been legal, we see vulnerable people who depend greatly on the care and support of others opting for euthanasia / assisted dying because they are made to feel a burden.</p> <p>I believe that one measure of the greatness of any country is the way that they care for the most vulnerable.</p> <p>I am also concerned about how such practice would change people's expectation of what health care is and can be. Connected to this is the concern I have regarding the threat to the rights of any health care practitioners who conscientiously object to participation.</p>	Not Answered	<p>I believe that what may appear to be a humane response to intolerable terminal illness is the focus around which campaigners in different jurisdictions have gathered support for assisted dying / euthanasia. I hope that those who vote on this issue familiarise themselves with the impact of such legislation in these other places. A central impact is that access to assisted suicide always goes way beyond the original limited group of people.</p> <p>I hope that those elected members realise that their decision will result either in a future legacy of continued care and support for the most vulnerable or one where government employees offer people death as a response to challenges which are currently met with care and support.</p> <p>The experience of state assisted life-taking as a legally accepted practice, changes the reality of all citizens, especially the most vulnerable.</p>

Disagree	<p>It sets a dangerous precedent that others will try and use to extend assisted dying into the rest of the UK. I believe it is unethical to change the doctor - patient relationship like this. Patients in countries with these systems report feeling pressure to accept suicide, to consider that they are a waste of effort or resources, that they are a burden, when decent palliative care should be our aim. Doctors will have to ask patients to consider such an action even though they may not agree that it is a patient's "best" interest or that it is acceptable to take another's life.</p> <p>Everywhere that assisted dying has been introduced with limited, tight indications has subsequently had the indications extended beyond the original intention. There is no going back from such a change and it would negatively change the value we put on human life. We should invest in good palliative, end of life care. In my experience people will say that they would choose to die if they had a terminal illness with no hope of recovery but when they really face the situation they don't raise the issue. The urge to survive outweighs the heartless expediency these laws would impose. Give people good palliative care and they will make the most of the time they have.</p>	Not Answered	<p>The law will be in direct conflict with a doctors conscience rights and with the reason most doctors trained. You are asking them to be official killers for the nation.</p> <p>"Assisted dying" is just a description that is easier to say and hear than talking about deliberately, legally killing someone, foreshortening their life. Some people who are already uncomfortable about the effort and/or distress to which they are putting loved ones will feel under pressure to agree to choose to die now. Even if only one person feels pressured like this it has to be wrong.</p>
Agree		Not Answered	
Disagree	<p>1. Suicide by another name.</p> <p>2. Once this is the norm there is pressure on the individual to move on from this world. This may not be overt but will be there: "my relatives need the money etc"</p> <p>3. Experience in Canada and other places is a drift to include eg mental health, children.</p> <p>4.The safeguards for staff (medical and nursing) are useless. They will be required to refer a patient even if they disagree and there can be sanctions. (cf abortion practice).</p> <p>It becomes one of the options which must be discussed: why should a doctor have to do this if he/she have to discuss the unthinkable?</p> <p>5. The incentive to provide good end of life care is reduced.</p> <p>5. Already it has been noticed that "assisted dying" saves money and so health care can be afforded more easily by the state. The cold calculations have been made.</p>	Other	<p>The whole section of Process should not be there. The present question is whether to legalise assisted suicide.</p> <p>If the answer is no then forget process. If the answer is yes then we are in another world which will be more frightening and the answers about process will be different.</p> <p>It is not the place of a doctor to kill someone. If the state decides on execution of its citizens, it should employ other people.</p> <p>The patient in front of a doctor must not feel that the doctor can potentially kill them. The whole relationship becomes altered.</p> <p>The section about eligibility also asks questions which are really about process. I feel that this questionnaire is put together by persons who support the proposal and the drift of the questions is towards assent for the new law.</p> <p>EG What is "unbearable suffering"? Who decides? Has palliative care been properly provided? If you (the state) don't pay for palliative care there will be more suffering, ergo more killing of the vulnerable.</p>
Agree	<p>Everyone deserves the right to decide to end their life , when their quality of life becomes unbearable for them and their family.</p>	Not Answered	<p>Not everyone who wishes to end their life, could be described as having a terminal illness.</p> <p>Someone who has a severe stroke and is severely disabled , unable to speak , difficulty eating /drinking. Should be able to end their days if they so desire!</p>

Agree		For over 5 years	In addition to 2 doctors, I feel another professional such as a social worker should be part of the assessment, particularly around why her they are being coerced by family members eg could visit and assess at home - potentially have more time than doctors.
Agree	We should not subject terminally ill people to unnecessary pain and suffering. It it the highest form of cruelty, not only for them but for the people who love and care for them, too.	Not Answered	
Agree	everyone should have the right to die with dignity and not have to suffer	For over 5 years	
Agree	It should be a right to die with dignity when you feel the time is right.	Not Answered	It should be open, clear and honest. As long as it is done in a respectful way, an ageing population needs this choice. With some illnesses, they can go on for years and be torture to the person. They should have the choice whilst still of sound mind decide if they want to end it before it gets too bad, if there is a long term prognosis. eg Alzheimer's, Parkinson
Agree	You should be allowed to determine your end of life assuming that you are in ill health. this will allow you to determine the effects directly on yourself but also consideration for your loved ones and family, who should not have to witness your suffering.	Other	If you have close family resident on the Island
Agree		For over 5 years	
Agree	A person of sound mind should have complete control over their body. Including whether or not they wish to continue living.	Not Answered	
Agree	I have cancer in both lungs. I have watched three family members, and several friends suffer so much towards the end, I do not want to die like that & neither do I want my daughter and family suffer from watching me die slowly in by inch.	For over 1 year	I agree that advanced directive is definitely a good thing. I know that I would certainly register my wishes right now - as for changing my mind IF I did, then there is no obligation to go ahead
Disagree	* There does not appear to have been an in depth review of those countries or states who have adopted similar legislation and the issues that have been encountered. * In such a matter consultation needs to have been independently created and monitored so that it balances all views. I do not feel that is the case with the Dignity in Dying Consultation of this one. * I understand that the IOM Government only provides 10% of the cost of Palliative care. An alternative would be to increase support in the first instance and then review the cases after a period of operation to assess if the number of extreme cases justified legislation which make this an issue for all in the final phase of life. * History indicates that legislation for difficult cases is rapidly loosened in the courts.	Not Answered	I was unable to respond to most of the questions as they fail to provide a response option if you are opposed to the proposed legislation. The consultation fails to provide an opportunity to respond to the well documented concerns of those who oppose assisted Dying legislation.

Agree	Throughout our lives we exercise constant evaluation of our state; making decisions to act or not through any given day. It therefore seems inconceivable to me that we deny that same basic human right to self determination when the stage is set for our end of days. I watched my father decline and die over a period during which he pled to be allowed to 'go' and commented he'd not have let his dog suffer that same way. Watched as our twisted sense of 'doing the right thing', stripped away his dignity and let him bereft of pride. I can agree everyone is different and most will not contemplate their ending; but please do not continue to consider those who do as outcasts or criminal. They have a right to be heard and a right to determine how their final act is enabled.	Not Answered	Terminology is everything, we must be careful not to cloud the intention with 'specifics' (ie person must 'sign' a declaration, stored in a 'secure' location) that undermine the intent. Consider also a secure location in a health care setting for a nominal fee where healthcare professionals are at hand if events arise, but equally loved ones can safely say goodbye. People who make this decision in a legally acceptable way must not be piriahs; they must have the support and respect they deserve.
Disagree		Not Answered	
Agree	To alleviate intense and unnecessary end of life misery and suffering.	Not Answered	The proposals as I have agreed to them look very sound. I keep enough money in my bank account to get me to Dignitas where that necessary. So please bring in the same compassionate end of life choices here. Were I ever to need this service, it would be a tremendous benefit to me to be able to access it here - and it would be very reassuring for me now (whilst perfectly healthy) to know that this provision would be available should I ever need it.
Agree	Its cruel to prolong someone's life when they are in pain and or have no quality of life	Not Answered	
Disagree	Assisted suicide laws are dangerous and unethical. Evidence from around the world shows that it is impossible to put in place safeguards that protect the vulnerable. In just five years since legalisation in Canada, laws have been relaxed to allow euthanasia for people who are not terminally ill. It will soon be allowed for people suffering with mental, not just physical conditions. Every week, a new story appears in the press of a marginalised person being euthanised because of poverty, disability or loneliness. People who are suicidal should be given help and assistance to live, not encouraged to die. No civilized country should go down this path.	Other	This is a leading question - I do not think it should be allowed at all Most of the questions in this consultation are extremely leading, and biased towards the proposal to legalise assisted suicide.
Disagree	Religious objections you are not God	Other	10 years

Disagree	<p>This would lead to people feeling pressured to ask for death and would open the gates to relaxation of any safeguards, as has already happened in countries including Canada and the Netherlands. In addition, no medic (whose vocation is to preserve life) should be asked to kill anyone. We should concentrate on good palliative care, not helping people reach an unnecessarily premature death.</p>	Not Answered	<p>Whatever safeguards are initially introduced, the reality in other countries that have gone down this route is that they are constantly chipped away at so that, eventually, children are euthanised, medics are not able to refuse to participate, good palliative care is not offered and the pressure 'not to be a burden' becomes irresistible. I am concerned not only as a visitor to the Isle of Man but also as a UK citizen, where assisted dying is likely to spread if it is allowed on the Isle of Man.</p>
Disagree	<p>To bring in assisted suicide for any reason is to devalue human life and encourage an attitude of killing being a solution to a problem.</p> <p>The experience of countries such as Canada, the Netherlands and Belgium where assisted killing has been legalised demonstrates very clearly that ‘safeguards’ are eroded as those with an ideological, atheistic view of what it is to be human continually press for liberalising laws. This is also demonstrated by the current abortion law where ‘safeguards’ are routinely ignored and pressure groups and profit making businesses continually press for liberalisation.</p> <p>Assisted Killing laws break the trust between patient and medical care professionals. For a health professional to even begin a conversation on assisting a patient to die would pressurise that patient by making them feel unwanted. The legal status also pressurises medical staff to act in conflict with their conscience.</p>	Not Answered	<p>Everyone who has a terminal illness should have access to the best palliative care available without any consideration of the cost. The most humane care of those with a terminal illness is for the government to ensure that this care is available to all. To use death as a solution demeans and devalues a persons life. Many do not want to be a burden when suffering and the legalisation of an assisted killing law will encourage a sense of worthlessness in patients and a culture of death in the medical profession. This has been clearly demonstrated in those countries that have brought in such inhuman legislation.</p>
Agree	<p>It is my belief that adults with capacity know what is best for them; and are perfectly capable of making their own decisions in life and in death. It is also my experience that there are states in human existence that are worse than death. I think that this bill, as proposed, should contain sufficient safeguards were it to become the law of the land.</p>	Not Answered	
Disagree	<p>It has been seen to be the thin end of the wedge in some countries, e.g. Canada, to become the way to solve health care costs.</p> <p>Also it negates the value of palliative care.</p> <p>Assisted dying is still murder, even if Tynwald allowed it.</p>	Not Answered	<p>This bill could lead to coercion of a person to die to suit someone else's agenda.</p> <p>This bill could be used as a cheaper form of 'health care'.</p> <p>In extreme circumstances it could turn into a 'tourist attraction'.</p> <p>I care because, although our family no longer live on the Island, but we did, and my husband grew up there.</p>
Disagree	<p>It is not for us to decide when life should be ended . I think this could be the start of a slippery slope . where will it end ? .it could be abused . in other countries it started out as assisted dying for terminally ill , but it has been used for people who have depression and older people who feel they have become a burden on society. This must never happen here !!</p>	Other	
Disagree		Not Answered	<p>Lots of the questions assume you have agreed with question 8. I disagree with question 8 and therefore disagree with any of the conditions because I don't feel it should be permitted under any circumstances, regardless of age, how many doctors etc.</p>

Disagree	Life is a gift given to us by God and only God has the right to take our life from us.	Not Answered		I answered “ not sure” to many of the questions because basically I do not believe people should even have the option to assisted suicide. I used to be a nurse and as as a young trainee nurse of only 18/19 years of age, I am disgusted with myself that in my training I encouraged a woman to have an abortion because that was what I was trained to say. Also feel guilt for being part of that and upset about having to handle a dead fetus. Professional staff shouldn’t have to be involved with killing unborn babies , babies, children or adults. They go into the profession to help people get well not to kill them. Having said that, I realise of course not everyone gets well and of course I have given medication to the terminally I’ll, which may help their pain , and ease their passing, but it is not active euthanasia! It’s given with an entirely different motive. Also, if such a law is passed allowing assisted suicide, it opens up a whole load of possible abuse of the terminally ill. These people need support and understanding not the abuse of quietly and quickly “ getting rid “ of them.
Disagree	I disagree because it is a betrayal to help anyone to die. It is our duty to help them to live, to ease their pain, to assist them in living day by day, with palliative care, etc, for as long as is necessary. Any other path becomes a slippery slop where little by little 'kindness' becomes an open door to save ourselves trouble and money - a very dangerous path for any society.	Not Answered		It is totally abhorrent that we agree to enter this dangerous and destructive area. Doctors have always sworn not to help anyone to die, not to administer poison, etc. To ask health professionals, whose skills are all about saving life and improving it, to assist in the taking of life is completely unacceptable.
Disagree	Assisted dying should not be permitted for those who have been labelled ‘terminally ill’ because firstly it sends the message that their life is worthless and a burden. Suffering is an unavoidable part of life - not a reason to end it. Moreover, if this were to be permitted, it will open the door to unlimited other potential life situations where one may feel it ‘best’ to end their life, in particular putting vulnerable people at risk (the elderly, those living with poor mental health and those living with financial & other issues).	Not Answered		Assisted dying should not be permitted under any case as it devalues the life of the individual - suffering is an unavoidable part of life, not a reason to end it.
Disagree	I am aware of the pressure that was put on my mother by the media and groups supporting assisted dying, that suggested that as she was over 80 (but in good health) it was her duty to kill herself (and she did). I fear the same pressure will apply if this law is brought in. Also, as a retired nurse, I spent my career caring for people and making their lives as painfree as possible. The evidence from overseas is that such a change in the law opens the door to go further and further down the path to anyone who wants to die.	Not Answered		This is a slippery slope that should NEVER be started down
Disagree	Because of human nature abuse can easily take place. Look at abortion that has gone from special circumstances to DIY abortions at home. The commandments of God say do not kill .Assisted suicide is killing.	Other	cannot agree to assisted dying for any reason	This is wrong, it is murder because it is being planned.
Agree	I watched my dad die a very painful undignified death, nobody should have to go through that.	Not Answered		
Agree	It is up to the individual how they die	Not Answered		

Disagree	<p>I had a life time career as a nurse (RGN) in various settings in the health profession. Palliative care has been undergoing wonderful development over the last few decades, as has pain management. However access to palliative care and pain management is hit and miss, depending on which region you live in and other causes.</p> <p>Before anyone even thinks for one minute about medical assistance for dying patients (i.e. assisted suicide or setting up legislation to give the go ahead for people to ask medical teams to kill people) the government should ensure that funding is consistently provided for palliative care and pain management throughout the health service in all regions. the case for assisted dying is ethical flawed. It is irresponsible care! It is a slippery slope and before long people will feel they have an obligation to seek assistance to die. The thought that legislation for medical assisted killing could be brought in places a terrible burden on vulnerable people.</p>	Not Answered	<p>some of these question are loaded questions written by someone who is not impartial but who is advocating assisted suicide.</p>	<p>I do not support Medical Assistance for Dying which is a euphemism for Assisted Suicide. Wherever assisted suicide has been introduced the general suicide rate also increases.</p> <p>In my experience as a nurse people do not ask to die. They want to live. Provision of palliative care and expertise in pain management means no one need suffer unbearable pain physically. Proper mental health provision for emotional pain also needs better funding.</p> <p>Medical assistance in dying is lazy health care. There is a place for letting nature takes its course and ot providing care that prevents death or prolongs suffering. Health providers are already able to do these things without the murky ethics of assisted suicide changing everything for health workers and people in general.</p>
Disagree	<p>Assisted dying is not needed. Research and experience shows</p> <ul style="list-style-type: none">- the vast majority of (rare) requests for assisted dying are withdrawn with provision of high quality, holistic palliative care- funding for palliative care is reduced in countries where assisted dying is legal. The blunt reality is a dead patient is cheaper than a living one needing palliative care- the slippery slope argument is not imaginery. If you legalise according to current proposals, before long campaigners will seek to extend the capacity of assisted dying to include euthanasia for the mentality ill and children, as in mainland Europe.- There is very clear evidence that once assisted dying becomes legal the vulnerable and disabled come under pressure (both perceived and actual) to end their lives.- assisted dying permanently damages the doctor patient relationship for all patients. Doctors are no longer people who always seek to bring healing, but who can and will offer "death as treatment".	Other	<p>This question assumes I am in favour of assisted dying. I am not.</p>	<p>The last series of questions were irrelevant for anyone opposed to assured dying.</p> <p>As a doctor who treats people who are terminally ill I urge you to reject these dangers proposals entirely.</p>
Disagree	<p>It is not necessary, it does not protect the vulnerable, it can cause more harm than good</p>	Not Answered		<p>This questionnaire seems very skewed in favour of the bill. The questions are asked in a manner that implies that it is a foregone conclusion that the Bill will be accepted. I have had to answer the questions based on that assumption, and was unable to answer them based upon my views that Assisted Dying is not necessary on the island - hence I do not think that my answers truly reflect my opinon</p>
Disagree	<p>Assisted dying amounts t murder. If a law is passed to allow assisted dying, very soon elderly people and disabled people will be 'supported' to die before their time; it is in God's hands when a person dies; it would introduce a very 'slippery slope' to introduce a law that encourages a premature death!</p>	Not Answered		<p>This consultation is flawed! The questions above only give the options, "Yes", "No" and "Nor Sure". To be a fair consultation or should also give he option 'N/A- Not Applicable" as quite a few of the questions/answers can only be answered with the 3 options given if you assume the (biased) assumption that assisted dying is a good idea!</p>

Disagree	<p>Absolutely disagree.</p> <p>We have excellent palliative care services on island that offers a dignified death and full support to both patient and all family members even after bereavement.</p> <p>I believe assisted Suicide may put excessive pressure on people requiring increased care packages and become an alternative option to save money (either govt funding or personal inheritance)</p> <p>Assisted suicide does not protect the vulnerable enough, even with all the proposed safeguards I do not believe this is sufficient.</p> <p>This is the start of a very slippery slope.</p> <p>In my own personal life I have seen people change their minds around assisted suicide from being definite about it at the start of what appears to be a poor prognosis, to changing their minds and being glad of the extra time once supportive treatments and measures are in place. This has been longer than the 14 days mentioned so I believe that is nowhere near long enough.</p> <p>People's own perception and personal definitions of 'quality of life' change as their circumstances change so there can be no one clear definition of what quality of life looks like. This is different for all people so one cannot make a judgement on anothers quality of life.</p>	Not Answered		<p>I fundamentally disagree with allowing any process at all.</p> <p>These questions on this consultation are completely biased towards the assumption that the respondent agrees and the consultation is just fine tuning the detail.</p> <p>There should be much more open questions with opportunity to comment or clarify to aid full understanding of the respondents opinion.</p> <p>I have not answered many questions because they could be easily misinterpreted by the reviewer to infer a positive outcome.</p> <p>It is entirely wrong that the person who leads on the members bill, (and so is known to be in favour) is the same person who leads on the consultation, setting the questions, and interpreting the results.</p> <p>This is NOT a democratic process.</p> <p>I would like the consultation to be reviewed and questions agreed with a variety of interested parties before going out again.</p> <p>Then it should be reviewed and reported on by an independent person/team.</p>
Disagree	<p>I am a practicing Christian who believes totally the instruction to all Christians that "thou shalt not kill"-which applies to terminally ill persons and even oneself!</p> <p>Humans do not have authority to decide "life or death", no matter who they are and that particularly applies to those in charge of normal affairs for the majority!</p> <p>UK accepted this when they did away with hanging criminals no matter what they had done or asked for!</p> <p>Please think very carefully before condemning yourselves for a terminal mistake-however well-intentioned you believe it is.</p> <p>God Bless you all.</p> <p>Thank you for the opportunity to speak!</p>	Not Answered	<p>No permissions whatsoever, despite the way the last questions try to guide me away from the right answer-"none"!!!</p>	<p>Get rid of the draft bill-the questions asked seem to assume it will pass into law BUT I pray for you all it does NOT DO SO</p>
Disagree	<p>Thin end of the wedge. I am deeply shocked at what has happened in Canada. Last year 3.3 percent of all their deaths were by assisted dying, I read.</p> <p>One difficulty is that people proposing a change in society all imagine the best possible outcome of their idea in their heads. It's only natural. Much better to consider what advantage the proposed legislation could have for thieves.</p>	Other	<p>Born in the Isle of Man.</p> <p>Please don't start a travel service to you from other countries.</p>	
Agree	<p>If was to have no good quality of life and terminally ill,I have always hoped that there would assisted dying on the Isle of Man.</p>	Not Answered		

Disagree	<p>It has been evidenced that once this kind of Law is sanctioned by the authorities, political pressures can be used to reclassify other groups of people who can be included for state sanctioned assisted suicide.</p> <p>I cite the situation that has developed with Canada’s euthanasia law, from terminally ill, to now include the chronically ill and disabled, to mentally ill. A similar situation now exists in Belgium where those with psychiatric disorders or dementia are also eligible. More controversially, is the inclusion of minors who come within the eligibilty criteria.</p>	Not Answered	<p>Given the vulnerabilty that paitients may be experiencing I have concerns especially as to issues around the use of coercion, disregard of patient's conscience rights, the euphemistic language of “assisted dying”, and the difficulty some people experience in accessing palliative care and social care on the grounds of economy, availability and logistics.</p> <p>Additionally, I would mention as previously - It has been evidenced that once this kind of Law is sanctioned by the authorities, political pressures can be used to reclassify other groups of people who can be included for state sanctioned assisted suicide.</p> <p>I cite the situation that has developed with Canada’s euthanasia law, from terminally ill, to now include the chronically ill and disabled, to mentally ill. A similar situation now exists in Belgium where those with psychiatric disorders or dementia are also eligible. More controversially, is the inclusion of minors who come within the eligibilty criteria.</p>
Agree	<p>Having watched the dignity afforded to my animals when a timely injection has painlessly enabled them to avoid more suffering, I have long wished the same humane end was available to me at the time of my own choosing if and when I needed it.</p>	Not Answered	<p>There should be further opportunity for the public to comment once a detailed draft bill is available.</p>
Agree	<p>We allow women to terminate pregnancies so why shouldn't people with terminal illnesses be allowed to choose when and how they wish to die. After all, this is voluntary - nobody is forcing them down that route.</p>	Not Answered	<p>I think it should also be applicable for people with an early diagnosis of dementia. Having seen the way my mother's mental health has declined since her diagnosis of Alzheimer's, I know that if I receive a similar diagnosis I will be seeking to end my life as soon as possible, ideally with medical assistance, but failing that, my backup plan is an exhaust tube through the car window.</p>
Agree		Not Answered	
Agree	<p>I think that an individual should be allowed control over their own life particularly towards its end when they may be suffering undue pain and distress. The idea that society should prevent someone from shortening their death is barbaric. All too often starvation, dehydration or exporting the problem is seen as an answer which they are clearly appalling.</p>	Not Answered	<p>It has to be remembered that palliative care is very often provided in a hospice and that a vast majority of hospices are run by religious charities. As a result they have a reluctance to recognise that palliative care cannot always provide the relief which is proclaimed.</p> <p>Also religions have a rather idiosyncratic way of looking at the purpose of life and they have a redemptive view of suffering.</p>
Agree	<p>People who are mature and mentally competent should be allowed to take such an important personal decision.</p>	Not Answered	<p>Since there is no point in consultation unless there is the possibility of amendments as a result, there should be a further round of public consultation before a draft bill is finalised.</p>
Disagree	<p>Do not kill.</p>	Not Answered	<p>It is immoral even to think about the possibility to kill a vulnerable person. It is shameful and disgraceful. You ought to learn from the mistakes of other nations who have assisted suicide. Just familiarise yourselves with unlawful killing of the people who ought to be looked after. What about babies? You have lost your mind if you are even considering introducing such laws. Who do you think you are- God? Did you give the life to take it away?</p>

Disagree	<p>All life is precious. Many people who are facing imminent death would be glad of any extra time alive. The first principle of medicine is "Do no harm". Who and how is terminal illness decided? Are the personalities of those assessors to be scrutinised regularly and are their underlying motivations and identity to be made open to the whole population? Governments have killed 4 times more of their own people in the 20th Century than were killed by war. Agendas change. Once enshrined in law, this plan will be very difficult to rescind. Assisted suicide is a soft initiator of later policies to reduce costs by killing older people or indeed those with expensive disabilities or babies with disorders likely to affect the likelihood they can later contribute to society. Arming some future despot with this tool is an appalling concept. Having seen so many die before their time I believe the current arrangement to allot great value to life must always be protected. older people have difficulty enough coping with life without such a fearful threat hanging over them.</p> <p>BAD IDEA</p>	Not Answered	<p>A disgraceful idea. Whichever dispassionate bureaucrat conjured up this plan should be ashamed to call themselves human</p>
Disagree	<p>The concept is against all fundamental principles of a civilised society e.g. the Law tries to prevent death; healthcare tries to avoid death; education tries to make healthy, happy, productive future adults. All industries work under health and safety requirements. Even in war, we do not believe in suicidal missions, aircraft without ejector seats etc!</p> <p>Such a society with the concept, immediately devalues human life to those born into it or move to live under its jurisdiction. Murders and other killings would be expected to increase over time.</p> <p>"Death doctors" would have to be dedicated to this sole endeavour, and never return to normal (life saving) medical practice.</p>	Not Answered	<p>This is depressing</p>
Disagree	<p>Today excellent, effective palliative care renders euthanasia unnecessary. Also it would be unethical as doctors take an oath to do no harm. In countries where euthanasia has been introduced, there has been a mission creep whereby deaths have increased year on year.</p>	For over 5 years	<p>I think old people would be particularly vulnerable and should be protected. It would be very easy to convince some frail individuals they were a drain on society.</p>

Disagree	<p>Sometimes when people express the desire to die, they later come to regret having done so, overcoming the despair they found themselves plunged in and discovering a new depth to life that they had previously missed. This transformation is often brought about by faithful, persevering, loving and compassionate care.</p> <p>Once euthanasia is introduced, a whole new dimension is brought into the situation. People who may have been encouraged and stimulated to live now encounter others who would encourage them to take their destiny in their own hands and request death. They are now pushed down that irreversible path, with many possible motivations: families who don't want the burden of caring for them, relatives who want their inheritance, hospitals and health systems that are drained of resources for which a euthanasia is more cost-effective, depression...</p> <p>It's a Pandora's box that shouldn't be opened. 21st century care including effective pain relief is that response that a healthcare system should be bringing. To kill is not to care.</p>	Not Answered	
Disagree	<p>Pain and fear are part of life. Opting out is immoral and against what LIFE is about.</p> <p>We should invest more in palliative and end of life care to enable those facing hardships know that the support will be there.</p> <p>I have witnessed the manipulation family members use to "euthanize" such as my father James Egan. After he had been deemed purposeless (despite not being in alot of pain and completely intact mentally) by his wife and sons.. to avoid future emotional hardship and reduce impact on family members lives.</p> <p>I have also witnessed medical errors and diagnosis changes. For example, my friend, William Waite who was originally diagnosed with supranuclear palsy (shortly after a schoolfriend had passed from MND) and arranged to kill himself at 24months - as he was scared to be a burden or to appear weak - his diagnosis was changed at 30months and he lived another 14 happy years and was brave enough to rely on a DNAR in the end.</p>	For over 5 years	<p>If people are given the right to choose to opt out of living - for WHATEVER reason it will be abused.</p> <p>Financial reasons are the basis of this being suggested and supported by the government - there is any merit to the suggestion that it is to provide patient centred care.</p> <p>Sick or dying people should not be able to choose when they die. The family or friends should not have a opinion as to the worthiness of another humans life.</p> <p>Furthermore, Doctors should not decide whether a person dies, most definitely not be paid to kill people, or be put into a position to reduce/ease schedule stress from the aging population.</p> <p>We should raise the bar in how we treat ourselves and others, including facing painful periods in life and supporting each other through it.</p> <p>Assisted dying should NOT happen in any way shape or form. Stop pretending to care about anything other than resources.</p> <p>(Please also, see my answers to question 8)</p>

Disagree	<p>At the younger end of the "adult" age group there is a vast difference in the level of mental development that has yet occurred and hence not everyone over the age of 18 would have the maturity, life experience, etc to make a life-ending choice. It can be impossible to be assured that what a young adult is convinced of at any one point in time is not going to change with further experiences months/years down the line.</p> <p>Terminal illness cannot be accurately predicted. Prognoses are, time and again, proven inaccurate with many people unexpectedly having longer lives which have enriched both themselves and those around them and indeed is valuable in the ever-evolving knowledge of medicine and health care.</p> <p>Even people who are perhaps no longer considered young adults tend not to stick fast to a viewpoint, or decision in all situations and circumstances. We can be swayed by our feelings and emotions, which are very fluid and transient. We sometimes do not realise the impact of our actions or decisions upon others, regretting mistakes further down the line.</p>		Other	<p>As somebody who is opposed to the bill I am finding it impossible to answer some of the questions due to their assumed premise that the respondent is in agreement for the bill to be progressed. My answer of "other" in this instance reflects my opinion that, if Assisted Dying was to become possible in the island, it should not be offered to non-residents at all. It should never be used as an income-stream for business, which is why I am unsure what length of time a person should be resident for in order to be able to access that provision.</p>	<p>This consultation should be rewritten. There are so many questions which assume a particular premise or viewpoint, therefore people are forced to select an answer which could easily be misinterpreted. It is so disappointing as to how poorly and unprofessionally the questions have been devised. I give examples below:</p> <p>Question 9 - does not give an option for those who answered question 8 with a "No". A time limit on life expectancy – it is such an inaccurate measure that it would be unfair for any doctor’ estimate of a person’s life expectancy to be the basis on which a decision to end one’s life is made.</p> <p>Question 11 – a) there would be other ways a patient could administer their own medication and b) giving health care professionals permission to administer life-ending medications would introduce a whole new area of risk for misuse/mistakes and even abuse.</p> <p>Question 12, 13, 14 – again, gives no option for people who do not agree with bringing the bill into force and analysis of answers will be at best skewed, at worst totally incorrect. For example, if I answered “No” because I don’t think it should be introduced at all, it could be construed as being in favour of assisted dying being available to people younger than 18. If I was to answer “not sure” it may give the impression that I have not formed a view on it yet. The wording of the question does not give me the opportunity to express my opinion.</p> <p>Question 15 – again, gives no option for people who think that either the number of doctors should be different, or that doctors should not be able to make that judgement call at all.</p> <p>Questions 17 – this is again difficult to answer because it infers that I don’t believe it is as black and white as some of these questions appear. I do 100% agree with assisted dying in the correct circumstances and with close medical contact/assessment. I believe a medical professional should administer the drugs and should be present to confirm death has occurred. I feel it should be decided when it would be done (after discussions with individual and medical professionals) rather than providing the drugs to be taken at some point when the individual decides. I appreciate this is very controversial but as previously mentioned, we don’t allow animals to suffer so why should we allow humans.</p> <p>The questions offering 'not sure ' imply support for assisted dying so I have left them unanswered.</p> <p>Offering 'not sure' as an answer implies support for assisted dying so I have left it blank.</p>
Agree	<p>I have watched a number of family members suffer through terminal cancer and other degenerative diseases which they eventually succumbed to; all of these individuals voiced their fear of dying and suffering slowly and if any of them had the opportunity to undertake assisted dying prior to the worst of their suffering all of them would have taken it. They’d liken it to an animal - if an animal is suffering they are put to sleep in the interest of kindness yet we insist humans with a terminal illness must suffer until the end.</p>	For over 1 year			
Disagree			Not Answered		
Disagree			Not Answered		
Agree	<p>I have watched both parents die and it was the worst thing ever.</p>		Not Answered	<p>People could come here if they wanted, like switzerland</p>	

Disagree	<p>1. Assisted dying is helping someone to take their own life which is assisted suicide.</p> <p>2. A person near the end of life can be under pressure from family and others not to be a burden. Any safeguards will inevitably be uncontrollable, and impossible to enforce in practice.</p> <p>3. It puts the medical profession in an impossibly difficult position.</p> <p>4. High quality palliative care should be a right and we should ensure it is accessible to all.</p>	For over 5 years	<p>I have serious concerns about the inevitable pressures on a seriously ill, or near end of life person, from family and others, or even the state, to not continue being a burden, financial or otherwise.</p> <p>It is totally unacceptable to expect the medical profession to 'police' or take part in the process or verification steps.</p> <p>The suggestion of storing lethal medication in the home does not even bear consideration. What does 'secure storage' mean - it would become a very high risk situation in any domestic environment.</p> <p>High quality palliative care should ensure that pain and suffering are minimised and controlled.</p>
Agree	<p>I am 86 and have witnessed the decline and death of members of my family and friends. Some of them have experienced weeks and months of horrible mental and physical suffering with no other hope of relief than death. The option of an assisted death would have been of great comfort to them, even if they had not asked for help to die. To let someone suffer without hope for a long time is cruel. I want the option should I need it.</p>	Not Answered	<p>If a person writes a 'living will' ahead of time, becomes demented and then starts to suffer unbearably with no prospect of relief, then subject to reasonable safeguards they should be given an assisted death. I have experienced a relative going to Switzerland for an assisted death MONTHS before he might have done had there been a law in the UK as his dementia was deteriorating and he feared that he would be unable to travel and make clear decision if he waited any longer.</p>

	Disagree	Illegal. Sanctity of life Too much, especially now and always for Doctors. If euthanasia creates a conflict of interest in the mind of Doctors, then government bureaucrats would inevitably resort to those who lack such a capacity. Josef Mengele is one character type who springs to mind. This "consultation" is riddled with woke. It timing over Christmas is a cynical attempt to sneak an evil policy through your holidaying parliament. It is a disgrace. It smacks of both a feeling that you need to "appear" progressive like Wales Scotland et al. and/or this idea has been planted by UK government interests as a proxy to introduce this bean-counting plan to England. It stinks. Far better to improve palliative care. Money spent on this, would naturally encourage high quality research, the spill-over from which would then reduce the initial need for such (palliative) support.	Not Answered		Drop it now rather than being buried in paper whilst suffering a barrage of media hate and international resistance. You are a tourist and tax haven. Both require trust. Think hard.
	Agree	I believe that any person terminally ill and in great pain should have this choice, provided that it is their own choice.	For over 5 years		
	Agree	Having observed two friends die within weeks of each other at hospice, they both approaches their death with grace and dignity, and were having as good a death as one could hope for. Except for their final weeks. Despite the amazing care at hospice and palliative care, their final weeks were weeks filled with pain, confusion and immense suffering - for both them and their loved ones. They would have both liked to have had the opportunity to end their lives at a time of their choosing, while they were at peace. There has to be a better way for our loved ones to die with dignity	For over 5 years		
	Agree	If an individual reaches a point where there is no way medically to help them stay alive then that individual should have the right to decide when and how they end what is often a very painful and traumatic trime for both them and thier family members.It's the humane thing to do.	Not Answered		nothing not already covered

Disagree	<p>Assisted suicide is. or should be. unnecessary and whilst many seek to assert their autonomy, it seems clear to me that medicine is a profession where the average patient relies a great deal on the expertise of practitioners.</p> <p>I have no formal medical experience but about 20 years ago, I heard a palliative care doctor say that 85% of all pain can be controlled, 13% can be managed and 2% controlled by sedation. The hospice movement is often invited to intervene to regulate the palliative medication and help patients live a reasonable life free from pain. It is often suggested that painkillers such as morphine shorten the life of a patient but I have heard that severe pain is likely to accelerate the patients death. Question 10 refers to unbearable pain and I suspect that many people applying for assisted dying do not fall into this category. Depression, loneliness and a sense of worthlessness are often a major factor in these requests.</p> <p>The history of assisted suicide is shrouded in mystery, including the length of time people take to die. There is little or no statistical evidence available and this makes me nervous. The only YouTube video I've seen on the subject is that of Terry Pratchett and when a cocktail of drugs was given to him to drink, his immediate reaction was to ask the nurse for water. She was unable to do what he asked and I wonder how long he suffered before he lost consciousness? Prisoners in the USA have endured some horrifying experiences even when the most sophisticated equipment is used.</p>	Other	<p>The permanent residence should be for many years otherwise the IOM is likely to become another Switzerland. Do the residents want this?</p>	<p>It's difficult to believe that a civilised society is contemplating the introduce of legislation to end the life of an innocent human being. This is what is happening in the UK where there have been more than 10 million abortions since 1967 and almost 215,000 in 2021.</p>
Disagree	<p>It is not ethical to kill except in certain instances, such as self-defence, war and capital punishment. What is being proposed is the intentional killing of innocent people. Wherever assisted suicide/euthanasia (ASE) is introduced, the 'right to die' easily becomes the 'duty to die' to save money, hospital beds, the stress caused to others seeing you in pain etc. By definition, the people envisaged as being 'eligible' to ask for ASE are those in a difficult position and less able to push back against pressure exerted, deliberately or unconsciously. It is not as if there were no unscrupulous people in the world, and some of those who would stand inherit from the patient's will.</p>	Not Answered		<p>It has proved impossible in all countries where ASE has been introduced on a supposedly restricted basis, to maintain that initial narrow provision: legal challenges (plus deliberate lobbying by ASE enthusiasts) have led in Canada, Oregon, Belgium and the Netherlands to the inclusion of the non-terminally ill, those unable to give consent and youngsters.</p> <p>The absolutely necessary (if we want to maintain a free and civilised society) freedom of conscience protection for nurses, pharmacists and doctors has also proved hard to maintain, whatever the initial promises.</p> <p>And everywhere the trust in the medical profession is subject to a huge query: will this doctor treating me pressure (or even hint) that I should choose ASE?</p>

Agree	<p>It is the right of every individual to choose when to end their life, irrespective of medical incompetence, personal bias and lack of respect for the medical establishment.</p> <p>Many people suffer unnecessarily because of iatrogenesis.</p>	Other	<p>Compassion should be offered to all who need it.</p>	<p>The patient should be able to choose the location, time and date of when they end their life. For example, a Pagan may like to die somewhere in nature at a time such as a Solstice or Equinox, or particular phase of the moon etc, not in a cold, clinical environment or other building.</p>
Disagree	<p>I do not believe we have the understanding or responsibility to end life, either by 'assistance' or any other means. I have always held this belief. I am terminally ill myself now and still totally disagree with assisted dying personally, and for the negative outcome such a way of dying will produce on those involved. I strongly feel all Doctors' and staff who carry out this procedure will be adversely effected. Relatives will be far more distressed than if natural death occurred, irrespective of the patient's illness.</p>	Not Answered		<p>I did not understand question 9</p> <p>I am a retired nurse with many years experience caring for terminally ill patients suffering from Ca and other life limiting conditions. In my experience people who asked for their life to be taken when they were experiencing pain, sickness etc; and meant it, were extremely grateful to be alive when their pain and sickness were under control, and thankful that no one succumbed to their request.</p> <p>I now have terminal Ca myself. I know what the future may hold in store for me. I pray that I will have the strength to cope with what is to come, with the help of palliative care and my family. I would feel very afraid if I was anticipating assisted dying and very sad if my husband and sister wanted me to do so.</p> <p>I believe once the option is there many will avail themselves of it because they will feel they must, sometimes due to pressure from family, sometimes because they are alone. It is not normal to wish to end one's life, depression must be present of some kind. We live in a throw away society. Elderly and disabled people will find life impossible. The old have an obligation to teach the young and will no longer be around. Life is hard enough for the youth of today as it is, I do not think assisted dying is a good legacy to leave them.</p>
Agree	<p>I had to endure seeing my brother die in agony in December 2021, when he pleaded with me to kill him but being helpless to end his suffering. He reminded me of a conversation we had some years previously after visting a cousin dying in a similar way but in a hospice saying; "you wouldn't treat a dog this way".</p> <p>My partner's 96year-old mother now suffers from dementia and lives in residential care (aka her 'prison'). Before her condition detreriorated, in her more lucid time she calmly stated "I want to die" and asked me to help her, saying "I've had enough and it's time for me to go, before I'm put into a home". Unfortunately, she no longer has the mental capacity anymore to decide for herself, but I KNOW, it's what she wanted. Her eysight has gone, she can no longer read, watch television or see where she is walking. This is not a dignified way for anyone, let alone an educated woman, to end their days.</p>	Not Answered		<p>Just to say that dignity in death should be the priority, wht is the point of keeping people alive who do not wish to to stay alive.</p>
Agree		Not Answered		

Agree	I have supported people when visiting their loved ones who have been terminally ill. I have seen the results of it. I have no doubts that I would not want to be left terminally ill.	For over 5 years		
Disagree	This would open the door to at present undefined categories. We have never had peace to act as judge on this subject, shown by the fact there is a need to debate it, in order to find a good excuse to do so.	For over 5 years		Questions 22 to 24 considering the prescription and handling of lethal drugs, cover truly dangerous scenarios; surely this cannot be made law? We should not be asking doctors, who have sworn an oath to preserve life, to become responsible for taking life. Just as we have opened the door to baby-abattoirs, passing this as law would open the door to euthanasia centres, leading to mass disposal of the suffering instead of improving palliative and psychological/spiritual care. As long as it doesn't lead to the island becoming a destination for people wishing to make use of this legislation.
Agree	I have seen relatives with dementia etc. become a mere shell, and would have no wish to ever be like that. If animals such has pets were in constant pain with an untreatable illness they would be put to sleep. Provided the necessary safeguards are in place, surely a person with capacity should be able to make that choice for themselves.	For over 5 years		
Agree	Care must be available for those that want it. My mother did not want it and had to put up with what I call being tortured to death with care. I wish to say that I have no complaint about my mother's treatment, the doctors and nurses did everything they could, society made her suffer. Unfortunately, if you don't want care, the only alternative you have is to travel abroad to Switzerland, or commit suicide. The Swiss option is only for the wealthy, costing between £10,000 - £15,000. Suicide is a necessarily lonely death and must be very upsetting for the family. I know 2 people who have committed suicide, because they could not face endless treatment. They were not in any way depressed. Question 9: None of the options suited my opinion. I think it should be up to the patient to decide when they are ready to die. Not a doctor. The doctors should give the patient the diagnosis and ask the patient how they wish to proceed and when. Question 11: People should be allowed to ask for intravenous medical, even if they are able to take oral medication.	Other	6 months should be enough	The options offered seem to be about limiting the options for the patient. The doctors involved should be there only to make a diagnosis, inform the patient of this, and then offer the patient a range of therapeutic options, AD being one of them. It should be that normal. Question 9: I think it should be up to the patient to decide when they are ready to die. Not a doctor. The doctors should give the patient the diagnosis and ask the patient how they wish to proceed and when. Question 11: People should be allowed to ask for intravenous medical assistance, even if they are able to take oral medication. Why do you force an option on people - give them the easiest option for them, instead of forcing a certain route on them.
Agree	It is somebody's right to determine their right to die	Not Answered		
Disagree		For over 5 years		

Disagree	<p>The inception and termination of a human life do not lie within the prerogative of human beings. No one has the right to terminate a human life, either their own or another's.</p> <p>The possibilities of palliative medecine and temrinal care make assisted death superfluous.</p> <p>This agenda, like many others being debated in our contemporary society, is sadly being driven by people who wish to foist their own conception of humanity on everybody else.</p>	For over 5 years		One can only hope and pray that the draft bill will not be promulgated.
Disagree	<p>Over 600,000 people died in UK in 2019. 45-50 sought suicide abroad. Even if this is the tip of the iceberg the number is only in the hundreds, and although their cases are very sad and our hearts go out to each and every one, they represent only a tiny fraction of the total.</p> <p>Any change in the law [experience elsewhere shows that even the tightest qualifications are always relaxed later] puts vulnerable people under pressure and these are in the hundreds of thousands. Already "fear of being a burden" is quoted more often than pain as a reason for suicide. Suicide is cheaper for the state than good quality palliative care.</p> <p>Everyone should listen to the Palliative care experts, who deal with real, not hypothetical, cases day in day out, when they say properly funded palliative care would reduce the number requesting suicide.</p> <p>In 41 years practising medicine I met several patients who requested suicide at their initial diagnosis but none that persisted except the depressed and these eased with effective treatment of their depression.</p> <p>When was the last prosecution for "mercy killing" in the UK? Leave the law alone and let the DPP assess any cases on it's merits. NB. 8 of the last 120 or so cases referred to the DPP were prosecuted for murder or coerced suicide.</p> <p>How many cases of people requesting suicide have you actually met? Compare that figure with how many "toxic" relationships you know that could lead possibly lead to coercion and please don't fool yourself that any safeguards will protect the vulnerable partner.</p> <p>The vulnerable do not have a voice...you must speak for them. The needs of the many must greatly outweigh the needs of the few however tragic their cases.</p>	Other	<p>Expert independent assessment is needed to ensure any arbitrary time set by inexperienced legislators greatly exceeds the time that people will migrate or holiday in the Isle of Man just for suicide</p>	<p>Good Palliative care is the real answer for these poor people, not some cheap fix that eventually puts so many vulnerable people at risk</p>
Agree	<p>People should be allow to die with dignity and without suffering for unnecessary amounts of time.</p>	Not Answered		
Agree	<p>If people are free to make their own choices in the Isle of Man, they should be to choose their ultimate fate too.</p>	Other	<p>People from all over the world suffer, we should not deny them the right their own countries deny them. However, they should pay or contribute to the costs if not residents.</p>	<p>I would say that the taking of the medication must be with a healthcare professional of a superior status and that the medication should at no time leave the possession of a relevant professional until such time as it is to be taken by the patient.</p>
Agree		Not Answered		

Disagree	Life is life, laws to protect life, of any shape or form. Are we trying to play God, same as with abortion. In todays world of PC correctness and all the knowledge at our fingerplus laws , yet the current trend is of self ..life and the end of life is fare greater than us or our human understanding, yet we want to have the right and goverments supporting to kill one self when you want, or another person or expect the medical futurity to have to take the consious resonsibility and burden thereof, therefore totally not taking responsibilities for our decisions, choices , nor living with the repercussions or course of our lives and out comes there after. This is wrong in any shape or form. Medically already the ground rules as determined what is life and when life deceased to be present is well recorded and adhered to. Where is our moral compass, integrity, and law keepers?	For over 5 years	Should not be allowed, are we IOM now want to become death legal murder, suicide island of the world. What kind of positive reputation and message do we want to send. Have you all gone made, don't we think for ourselves anymore. Why are a minority of people and wealthy dictating to nations or our medical or governments on these matters. Read the Bible, the 10 commandments or general guidance in all shape and forms 8n the world and nature..this is wrong. Aga8n, we are spending millions, time, human manpower and resources to entertain this. Why are we not tak8ng our time, money talent and fix the thing we can by encouraging, teaching the	The way this survey has been done, comes across, as if the decision has already been made, very sad, what kind of message are we sending to our generations to come? We opposed Concentration camps, genocide, death penalties etc, suicide, yet here we are.....
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	<p>Disagree</p> <p>I believe life is precious. Life is full of difficulties and challenges but with the correct support and people around us , life still has purpose. The older I get, the more I realise that life is a gift which could change or be taken at any moment. I hope that there will be good, caring people around me when I need them. Family, nurses , care staff ,doctors , home care , palliative care. I have lost my parents, my in laws, a cousin, many aunts and uncles . Most have died at home, some died in hospital, one in a care home. Some of the deaths have been sudden (my Dad, my Mum) and some have been a slow decline - my inlaws. I am immensely grateful to the hospital, home care and care home staff who have made their last few years or months comfortable. There was a lot of kindness, freindship and love and tears , memories and laughs. There were sacrifices asked of the family caring for them too - but well worth it. Heart disease, cancer and dementia and frailty have affected my family and continue to do so. I hope that all people can experience care, love , freindship and value in their final years and good quality end of life care, readily available if needed,</p>	<p>Not Answered</p>	<p>I think this bill is very worrying. The figures quoted for those in favour of a change in law do not actually state how many people support it. I feel the vast majority of people are not fully aware that if this bill is approved it will affect everyone in the future. I feel that those in favour of this bill are very well organised and have the means to fund a very effective campaign to publicise what they want. I don't think the vast majority of people have any grasp of what has happenned in other countries where this law has been changed. Safeguards have quickly been removed, age limits reduced, scope widened to include non-terminal illness and mental health. In the Netherlands it is now being debated whether a person can request assisted suicide if they are over 75 years and feel that their life is complete, In Canada, safeguards have already been challenged and changed after only 6 years.</p> <p>Palliative services need proper funding so that they are readily available to all who need them - either at home or in a hospice. People should be able to experience good quaily care before deciding that it is not effctive. Medicine is advancing all the time but more needs to be done - more investment and more training.</p> <p>I am gravely concerned too that the right to conciencious objection will not be strongly supported in reality. A doctor, nurse or pharmacist should be able to not paticipate in assisted suicide including the right not to be expected to direct someone requesting it to another healthcare professionla who supports it.</p>
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Disagree	<p>Whilst assisted dying may be thought by some to be a compassionate route to alleviating suffering there are many reasons why this route should not be followed.</p> <p>1) Firstly there is a fallacy in the argument for its adoption. Although many people fear that their illness will lead to unbearable suffering, and distress to their families, with proper palliative care their fears are almost always unfounded and the extra time with family and friends allows people to die with peace and dignity. Establishing assisted dying as an option will probably lead to people adopting that option based on fear without exploring other options.</p> <p>2) Assisted dying would inevitably change the relationship between health professionals and their patients/clients. The Hippocratic oath binds doctors to "first do no harm", clearly this would not be the case if they are essentially obliged to take the life of their patient.</p> <p>3) Although there may be a theoretical right for doctors to exercise their right to act in accordance with their conscience, experience suggests that they are highly likely to find doing so detrimental to their career. As a pharmacist (admittedly now retired) I have experienced similar issues in regard to EHC and would not wish to be in a similar position when it comes to dispensing lethal doses of drugs.</p> <p>4) Experience with other territories where assisted dying (AD) is already permitted show clearly that the so called 'slippery slope' concerns are far from misplaced. Although they all originally had quite tightly drawn controls on who could request AD, and the requirement for two doctors to certify, many of these controls have been abolished or at the least diluted. Once the principle of AD is conceded it almost inevitably become applied to more and more cases with less and less control. For example in Canada</p>	Not Answered	<p>Given the seriousness of the step being taken, at the very least all applicants should be required to be assessed by a psychiatrist to ensure that they are mentally sound in their choice, have fully considered other options and have not been subjected to any from of pressure.</p> <p>Whilst the proposed safeguards requiring the agreement of two doctors, signing a written declaration and providing a 'cooling off' period appear reasonably robust experience from other jurisdictions suggests that these constraints soon get swept away if the principle of AD is conceded.</p> <p>It is vital that conscientious objection provisions are water tight and not only protect the right of any health professional to opt out from personal involvement but also protect them from having to 'signpost' to other health professionals who do not object. Care needs to be taken that exercising their conscience does not have a chilling effect on the career progression of the health professional concerned.</p> <p>As a pharmacist I have grave reservations concerning whether lethal medication can be securely stored in a patients home</p> <p>A far better use of the time and effort involved in this consultation would be to put more resources and training into enhancing the provision and awareness of high quality palliative care.</p>
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Disagree	<p>No doubt that the proposers are well intentioned but I think they are naive, and making a terrible mistake.</p> <p>1. It's the thin end of a very large wedge. Other jurisdictions are already seeing pressure for expansion to, for example the mentally ill. I would expect the limitation to physical illness to hold for a few years at most.</p> <p>2. By being the first jurisdiction in the British Isles moving ahead of the UK, the Island will be targeted by pressure groups on both sides of the debate and face all the costs of legal cases up to and including ECHR.</p> <p>3. There will be collateral damage to our reputation, for example the visitor economy. Potential visitors will get tired of jokes about "return ticket or just one way?" And association with death is not good for tourism. The first thing I knew about the Island was the Summerland fire. It was 25 years later that I finally came here.</p> <p>4. Question 9 asks about a limit on life expectancy, but is meaningless without knowing the basis on which it is being asked. Doctors can take a view based on their experience, but people often live more or less time than expected. Is the proposed period a median based on typical patients at a similar stage? Or a 90% expectation? Or what?</p> <p>5. Online safety and blocking sites that promote suicide is a key theme in public policy. This Bill would dilute that message.</p>	For over 1 year	<p>As noted above, it's a bad idea, but being a place where people go to die is not exactly the kind of thing that the Government's economic strategy is aiming for.</p>	<p>This consultation is biased and not fit for purpose.</p> <p>Many questions are written in such a way that they force a person who thinks the whole project is a ghastly mistake to either "agree" Q12, 15, 17, 18 & 20 or "support" Q19.</p> <p>In question 12 the idea of making assisted dying available to minors is shocking, but I cannot oppose it without specifically "agreeing" to it being available to over 18s.</p> <p>Most of the steps here are designed to mitigate some of the potential harms, but it's like being asked how best to arrange the deck chairs on the Titanic.</p>
Agree	<p>This helps people who are going to die their own way and without the possible pain that might follow, I've been 100% behind assisted dying for most of my life 50 years, I do hope this comes in to help people on the island to die the way they want to die and not a horrible death</p>	Other	<p>Assisted dying is needed in the whole of the UK and shouldn't be for only the Isle of Man</p>	<p>No I just want it to be legal to stop the suffering of people in very bad health let them leave and be at peace</p>
Agree	<p>No one should ever have to die in pain or distress. If a poor animal was in that position he would be gently put to sleep. We are not animals and have the means to decide when if we are in pain and suffering we want to end our lives with dignity.</p>	Not Answered		<p>I would like, as we are part of the UK that they may be included. But if this is not possible I would abide by any decision our government made.</p>
Agree	<p>I watched my mum suffer with cancer and believe we need to die with dignity.</p>	For over 5 years		
Agree	<p>If this is what the person that is suffering wants so be it!</p>	Not Answered		
Agree	<p>I believe humans should have the right to end their life if reasons justify it. It is not fair to put someone through pain and suffering because someone else wants to keep them alive for their own needs. We live our lives how we want to up until the point a medical condition takes over then we no longer live a life of choices.. just discomfort and suffering for the patient and family.</p>	Not Answered		<p>If the patient or family retrieve the medication from a pharmacy does this mean they then can die peacefully in their own home? If so... would a physician be on hand as a witness? What would be the situation with NHS capacity? Overall I think that this is a fantastic idea to give people the choice and the peace of mind along with a dignified passing, free of extensive suffering.</p>

Disagree	<p>Assisted dying for the terminally ill should never be necessary where optimal palliative care is available. Where 'feeling a burden' is the primary motivating factor of the terminally ill person this is usually a red flag indicator of elder abuse in the US states which do NOT have assisted dying. In those which do have assisted dying 'feeling a burden' is a green light for assisted suicide. Something is very wrong in society that needs to offer a lethal prescription for those who feel a burden to others.</p> <p>Furthermore from question 11 it appear you propose introducing euthanasia also for those unable to take the lethal does themselves. You should take a hard look at where Canada has got to before you do that,</p> <p>The questions I have left unanswered implicitly assume support for the introduction of assisted suicide and euthanasia (to be clear in terminology aout what you actually seem to be proposing) Since I do not support it I cant answer those questions without implying I accept the basic premise.</p>	Other	See previous open text answer	<p>If you do pass a law permitting this then a doctor should be present at the death. In Oregon complications of taking the 'lethal' dose (some 9 people have survived it to date and subsequently died naturally!) are only able to be reported in around half the hundreds of cases there each year because in the other half no witness is present. How can you ensure the dose was voluntarily taken if allegedly no one was there? But then how can possibly ensure a doctor or any registered health care professional is present if the person has the Px in their home to take any time they wish to do so? Proper regulation has proved impossible in Oregon but with a small population you might be able to ensure a doctor is always present to ensure coercion was not exerted?</p>
Agree	<p>Safeguards discussed need to be applied and personal and family finances should not be a factor in an individual choosing assisted dying over palliative care.</p> <p>Palliative care options should be maintained or increased - everyone who wishes to have palliative care, should be allowed this option without coercion to consider assisted dying.</p>	Other	3 years	<p>I would prefer that the response to this survey were to be reviewed by a committee of political members, civil servants and health professionals but as a private member's bill, I understand this is not the case.</p>
Agree	Strongly agree. People should have the choice, especially those in unbearable suffering	Not Answered		
Disagree		Not Answered		
Agree	I support a person's right to choose and hope that after assisted dying the options may be extended e.g. to assisted suicide.	For over 5 years		<p>I support the proposals as broadly outlined and hope they may be extended in future.</p>
Disagree	Assisted suicide for the terminally ill is dangerous and unnecessary, and is the start of the slippery slope whereby it is extended to the chronically ill and then the disabled etc. It devalues life and this will impact on society at large. Time and effort should focus on palliative care provision to care for terminally ill patients rather than legislation to kill them.	Not Answered		
Agree	I feel like this is long overdue and don't believe that people should suffer long term with lack of dignity paying for care that's overpriced. I would happily sign a contract to end my life if I was to become progressively sick with an illness. It's people right to have the decision. Unfortunately there are too many people that I have known that have suffered long term illnesses with a full mind and slowly deteriorated in a slow death.	Not Answered		<p>Following from the above questions. Surely people can not collect this from the pharmacy and take it at home, I would have thought that they would need to be in a hospital or place of care for the medication to be administered.</p>
Agree	My father died as a result of bowel cancer in early 2022. Watching the level of pain and suffering that he experienced towards the end was horrific. He begged to be allowed to die and we were helpless to do anything. Because of Covid palliative card was unavailable and he died in hospital, in pain.	Not Answered		

	Agree	Long term pain and suffering (due to terminal illness or long term unmanageable pain) causes major mental health issues for individuals and this will allow for a this to be addressed. People feeling trapped with no other way out due to long term issues would be sign posted to help within this process and may prevent suicide on a more general basis but if there is no other way out for them they will at least be supported.	For over 5 years		
	Agree	In some instances euthanasia is the most humane option available	Not Answered		
	Disagree	Dignity of life is critical for a civilised society. If we accept that it is OK to assist people to die we start a very slippery slope. Whatever safeguards we put in place, there will be people who decide they don't want to be a burden on society and ask to die. Then families might encourage that to save themselves the bother or to speed up an inheritance. What we need to ensure is good paliative care and support for the terminally ill. We do not need to keep them artificially alive, and if a side effect of drugs used to ease their suffering is that their lifespan is shortened so be it. That is massively different to killing them. If I was to suggest that as a society we kill off everyone when they hit 75 I would be rightly called mad. But it is not far fetched to say that once we start allowing assisted dying it will become the norm that as soon as someone is a burden they are killed. You only have to look at the abortion act to see that what was intended to prevent back street abortions with clear controls has become abortion on demand. We cannot say that this won't happen here.	Not Answered	Question is irrelevant. We should not allow it and we certainly should not set ourselves up as a death destination.	We should not proceed with this in any form. We are getting to a crazy position where on the one hand we spend millions to keep some people alive and now we're proposing to spend money to kill other people off. The world is going mad. We should focus our health and care budgets on ensuring people are comfortable and have a good death rather than trying to extend some lives for a few years and have other people in a state where they think it would be better if they were dead.
	Agree	Allowing terminally ill individuals the dignity of choosing their manner and time of death should be a fundamental human right.	For over 1 year		Our MHKs should stand up for the rights of informed individuals to be able to make a choice that is supported by legislation, and safeguarded by appropriate provisions. Healthcare professionals who cannot support assisted dying should not be ostracised - it's their right to choose how to deploy their skills. Perhaps have a rota/ pool of professionals who are trained in end-of-life care, so that their presence can support the patient and also the family. In terms of process, perhaps promote the use of living wills in more circumstances, and ensure that elderly patients (perhaps with dementia) can determine their pathway before their faculties are so impaired that their rights are denied. Ensure that living wills/ patient instructions are reviewed regularly by the patient to reflect current wishes.

Disagree	<p>I truly believe this is an incredibly dangerous law change. Changes in law become uncontrollable by extension, so that unintended groups become eligible, eventually reaching people such as the mentally ill in Canada.</p> <p>It is also unethical for medical professionals to take life rather than preserve it. It puts them and their patients consciences under extreme and unfair pressure.</p> <p>And it is unnecessary. Coercion will be a huge factor that cannot be easily detected. But also, we have world leading palliative care in the UK, however I can see that people who are terminally ill will feel that they must take this assisted suicide route for the sake of others and not themselves, a form of ‘self-coercion’ .</p>	Other	For over 10 years	<p>As I said, I think this is incredibly dangerous and inhumane. People who are terminally ill should be protected by our society, given access to our wonderful palliative care system in which are wonderful, professional staff who give such dignity to these patients.</p> <p>It would be so wrong to ask or expect medical professionals to consent to or carry out assisted suicide. Even the term ‘assisted dying’ suggests a menacing of coercion. People will come to believe they are a burden and shouldn’t be so to others whereas in reality, they can be helped to maintain dignity in their suffering.</p> <p>It is terrifying to think that this could be the first step towards removing the needy from our society. Sounds dramatic but changing the law in this instance would be the first chick in the armour of lawful protection for all.</p>
Agree	<p>There are many circumstances where a terminally ill person should be allowed control over the end of their life so they can die with dignity, without pain and with loved ones around them. And I feel strongly that it should be made legal to do so.</p>	Not Answered		<p>I would support extending this legislation to people who might be living with an illness or disability that is not terminal but is making their life unbearable. We do not have control over our birth. We should be allowed more control over the manner of our death.</p>
Agree	<p>Having watched an elderly relative wanting to die and not being able to help them this needs to happen. It was absolutely heartbreaking.</p>	For over 1 year		
Disagree	<p>It is unethical, uncontrollable as can be seen from evidence in other countries which have allowed this, and unnecessary. What we should be offering is ever better palliative care.</p>	Not Answered		<p>We are in conscience bound to preserve the sanctity of life.</p> <p>Risk of coercion of vulnerable groups of people.</p> <p>Risk of devaluing lives of specific groups of people.</p> <p>We must support rights of conscience.</p> <p>We need to offer adequate palliative care to allow people to die in true dignity.</p> <p>The use of euphemistic language in proposed legislation is abhorrent.</p>
Agree	<p>Having seen and cared for two of my grandparents while they were terminally ill and witnessed the decline they went through, I support assisted dying for this reason. They were also able to say that this is what they would have wanted if it was available to them too.</p>	For over 5 years		<p>I believe that every situation is going to be different and unique, and each situation needs to somehow be treated as such.</p>
Agree	<p>To want to die and yet be unable to die is torture.</p>	For over 5 years		<p>There is one important piece missing. Since Shipman health professionals have been restricted and over cautious about over-prescribing pain relief at end of life. Having seen family death where pain relief was inadequate in the last days I do not wish to have that death. That will tempt me to request assisted dying when it may not be necessary. The law should enable a trusted person to authorise pain relief at life threatening levels in the last few weeks of life. The trusted person should be authorised in writing by the dying person whilst there is still physical and mental ability to do so. The law should be written such that trusted persons and medical professionals are not accountable for the effects of high levels of pain suppression when an authorisation is in place.</p>

Agree	I would want that choice to end my suffering and would want everyone to have that choice.	Not Answered	A living will should be permitted so if the person is not mentally sound at the time their wishes are followed.
Disagree	Unnecessary and dangerous legislation	For over 5 years	As a retired [though still working] geriatrician I did not come across any clinical situations where I or the patient felt the need for assisted dying or euthanasia .However the family and societal pressures would inevitably change this dynamic should this become law. The doctor`s position as carer and also quasi executioner would alter the doctor patient relationship.I have no confidence with regard to proposed safeguards. These would be eroded over a short period and the scope of euthanasia extended , as has been seen in other countries.
Disagree	<p>I am a qualified counsellor. While living in NI I was asked to create a crisis-counselling team for a suicide prevention organisation called Foyle Search and Rescue. I managed this team for some years, during which we saved many lives which would otherwise have been lost to suicide. I moved on from this organisation in 1997. On 6 February 2010, my own wife died through suicide. Her brother took his own life 4 years earlier and I later learned that two of their grandparents also ended their own lives before my wife and her brother were born.</p> <p>While serving here in the IOM as a community Police Officer, I assisted many individuals and families effected by suicide. I knew people who had been prevented from carrying through their intention to kill themselves, and was grateful that this was the case.</p> <p>It is obvious that if a person is determined to die, and has someone who will help them to do so, then little can be done to prevent that from happening. But this scenario is entirely different to a government sanctioning assisted suicide.</p> <p>I have spent many hours listening compassionately to people who want to end their life. The vast majority came through. With unconditional love, a loving listening ear and a com[passionate presence, many people will hold off from a decision to end their life.</p> <p>The summary leading in to this questionnaire appears to have been written in favour of introducing this legislation. It's a very different thing writing a summary that has many parts plagiarised thoughtlessly from the opinions</p>	Not Answered	

Disagree	<p>Any change in the law would undoubtedly place pressure on vulnerable people who could feel a burden on their family or carers, and, consequently, may deem that they have a moral obligation to opt for assisted dying.</p> <p>The proposals states: ‘A person is deemed to be terminally ill if a registered medical practitioner has diagnosed them as having a progressive disease, which can reasonably be expected to cause their death.’ It should be noted that some progressive diseases can take years to kill a person. Oregon regularly sees patients who have been confirmed as likely to die within six months far outliving that (even by several years).Thus there is scope for thousands of pounds to be expended in care bills. Therefore, coercion or pressure by family members or carers for the purposes of avoiding expensive care bills or immediate access to the person’s capital is a real possibility.</p> <p>The proposals also state: ‘Two doctors assess that the person is making an informed decision without pressure or coercion...’ This raises the question: how effective would this be in practice? Doctors aren’t professional investigators and do not have the resources to fully investigate a situation such as this. People who have the guile to manipulate a vulnerable person to opt for assisted dying would, probably, be plausible enough to convince doctors that no coercion or pressure had taken place and also coach the person applying for assisted dying to do likewise. The assessment could well degenerate into a tick-box exercise.</p> <p>There is also the ‘slippery slope’ argument to be taken into consideration.</p>	Not Answered	<p>I wish to make it clear that I am wholeheartedly opposed to the concept of assisted dying. However, I would like to take this opportunity to comment, in a spirit of damage limitation, on some of the questions, in case, regretfully, assisted dying legislation is passed:</p> <p>Q 9. Do you think that there should be a limit on their life expectancy?</p> <p>Response: No. Predicting life expectancy is notoriously difficult, as repeated studies have shown.</p> <p>Q 10. Do you support the provision of assisted dying for someone who has a condition which causes unbearable suffering that cannot be alleviated by other means but which may not give a terminal diagnosis?</p> <p>Response: No. ‘unbearable suffering’ is a highly subjective term, which could cover a vast range of chronic conditions, disabilities, and even potentially mental illnesses.</p> <p>Q 11. If they are unable to take oral medication should a health care professionally be permitted to administer medication intravenously to achieve death?</p> <p>Response: No. The definition of the term ‘unable’ could be reinterpreted to include physically incapable, physically difficult or emotionally difficult.</p> <p>Once we have started down this pathway we can not undo it. This is dangerous in the extreme.</p> <p>The proposed bill is extremely dangerous, especially for the sick and elderly and should be dropped without proceeeding further.</p>
Disagree	Human life is a precious gift	Not Answered	
Disagree	<p>If assisted suicide had been legalised previously then it is likely that many of the cures and treatments that have been developed over the last few decades would not have been discovered. Experience in other countries, where assisted suicide has been legalised has shown rapid deterioration from the the initial intention for specific 'hard' cases to general euthanasia for anyone considered 'unfit to live' including disabled children/young adults. Sick, disabled and elderly people are at grave risk from pressure, implicit and explicit, to being made to agree to end their lives.</p> <p>Medical professionals should be involved in the care and cure of their patients, not killing them.</p> <p>Britian is a world leader in palliative care and we should be making full use of this.</p>	For over 5 years	

Disagree	<p>As a committed Christian, I am convinced that the Bible teaches clearly that the sanctity of life and that the decision for life and death is in the hands of the Living God alone. Assisted dying will amount to self murder and I cannot see how any government who acknowledge the Living God and upholds Christian values could permit such an act.</p> <p>I have personal experience with three elderly parents, who were terminally ill. Their suffering ranged from 1 week to 1 year. No one can argue that it was very demanding and sad to experience the suffering. However, it was also a time of tremendous blessing for both the suffering parents and for our family. In the case of all three parents, the Lord spoke clearly to them during this time and they had the opportunity to repent from sins that only the Lord, through the Holy Spirit revealed to them. They accepted the Lord's sovereignty and endured until the Lord took them in His grace. Although their suffering was hard to experience, it is now over and I am immensely proud of each of them for the courage and endurance they displayed during their suffering. Their endurance and hope during their time of suffering, is a great source of inspiration for me.</p> <p>For anyone that agrees with that assisted suicide should be permitted, I would urge them to do research of what happened in other countries that permitted the legislation. Belgium, the Netherlands and Canada are good examples. It also started very "innocently" for terminally ill adults with many proposed safeguards. But it was a door that opened to a very slippery slope. The proposed safeguards may appear at first glance to be very sensible and sensitive. However, the experience in other countries showed that amendments eventually follow, which then makes assisted suicide more and more acceptable.</p>	Other	Based on my answer to question 8, it should not be allowed for any resident.	Please hold a referendum so that each resident of the Isle of Man may have the opportunity to vote on the matter.
Agree		For over 1 year		
Disagree	<p>I worry that it would do more harm than good. Only a small minority of people could possibly benefit - for most, expert palliative care can relieve symptoms. But many vulnerable people could be harmed: Some may be encouraged to end their lives to reduce the costs of care; some may choose assisted suicide while suffering from depression; some patients given only a few months to live turn out to live for many years</p>	Not Answered		
Agree	<p>I support the legalisation of assisted dying for adults who are terminally ill and mentally competent at the end of their life.</p> <p>The current prohibition of assisted dying causes much unnecessary suffering to dying people and those who love them. It is not the case that palliative care is sufficient in all cases to prevent or relieve suffering; some dying people need the option of an assisted death.</p> <p>The option of travelling to Switzerland to die is not acceptable and for some people is not feasible.</p> <p>Assisted dying has a proven track record in other countries that show it is safe, fair, and compassionate and there is no reason why it should not be so in the Isle of Man.</p>	Other	A compromise between the above - maybe three years	I think the Isle of Man needs to introduce the possibility of assisted dying. However clearly there need to be safeguards for vulnerable people and to avoid exploitation of the law. There also need to be safeguards to prevent the Island being overwhelmed by "Assisted Dying tourism" - ie there needs to be a robust system to ensure that the facility is not available to non Manx residents.
Agree		For over 1 year		

Disagree	<p>I am strongly opposed to any form of assisted dying. My main concern is the impact that this will have on the weakest and most vulnerable in our society. Legislation forms an important symbolic function and to have assisted suicide as an option (even in a limited form) will exert unnecessary and unpleasant pressure on a far wider group of people. I have spent my working life amongst those suffering from homelessness and those in hospital. Many of these people have struggled with chronic mental ill health and also suffer marginalisation and exclusion from society. Having assisted dying as any sort of option risks normalising the concept in people's heads that suicide, or death, is an appropriate and desirable answer to the problems they face. This structural level of thinking will influence people even if assisted dying starts as an option in only limited cases. Older and chronically ill people will start to think: if this could be a possibility, should I take it? The only way to avoid this unwanted scenario is to ensure that assisted dying remains illegal in all cases.</p> <p>The examples of jurisdictions such as Canada and the Netherlands show how hard it is to maintain safeguards when any form of assisted dying is permitted. Indeed, I find it impossible to see how one could logically argue against extending 'the right to die' to a wider and wider group of adults if the principle has been admitted. Terminal diagnoses are notoriously fraught and inaccurate, and therefore provide no clear base for a 'safe' form of assisted dying. Who can determine if an individual is undergoing 'unbearable suffering'? Such a perspective is inevitably purely subjective. If a terminally ill cancer patient can access assisted dying, why not a chronically mentally ill patient who is going through 'unbearable suffering'? It is easy to see how and why assisted dying has been extended in other</p>	Not Answered	<p>Assisted dying should be illegal for all residents or visitors.</p>	<p>The implication of question 10 in this consultation already shows how far this Bill might go: health professionals 'killing' people when they are unable to administer drugs themselves. The consequences of this thinking for the consciences of health professionals, and the need to provide adequate routes of conscientious objection, are profound. The possibility of lethal drugs circulating the community or being stored at people's homes is an added and unpleasant risk.</p> <p>I am deeply disappointed in the timing of this consultation. To ask for views over the festive period and in the dark winter days of the new year seems unpleasant and disingenuous, and does not convince me that the consultation is really seeking to have an open and honest discussion with as many people as possible.</p> <p>I reiterate my concerns from my answer to question 8: this law change is uncontrollable, unethical and unnecessary. Assisted dying in all it forms should remain illegal in all cases.</p> <p>We need better palliative care and better access to it. We need a more inclusive, equal and just society where people do not suffer from the cost of care, exclusion, poverty and loneliness. We need a better answer to the crises facing the health and mental health services than allowing the sickest and most vulnerable to end their lives. These are problems we must tackle as a people together, not just as individuals struggling with difficult decisions and circumstances. We belong to one another.</p>
Disagree	<p>Vulnerable people may feel pressurised into ending their lives, for instance by unscrupulous relatives. Also, people may agree to assisted suicide as they may feel that they are a burden to others.</p> <p>Where assisted suicide has been allowed, the criteria for it gets ever broader and broader. For example, in Canada, within three years of permitting assisted suicide in 2016, one of its key ‘safeguards’ - that assisted suicide should be permitted for only those who are terminally ill and with less than six months to live – was removed and the chronically ill, disabled and mentally ill were included.</p> <p>If assisted dying is legalised, then euthanasia will be. There is evidence that good palliative care would be run down. It has been reported in Belgium and Canada by oncologists that nurses and social workers are leaving palliative care units as they see them becoming ‘houses of euthanasia’ and their work focus changes from caring for their patients to preparing them for a doctor-assisted death.</p>	Not Answered		<p>Vulnerable people may feel pressurised into ending their lives by the unscrupulous or they may feel that they are a burden to others.</p> <p>Where assisted suicide has been allowed, the criteria for it gets increasingly broader, such as in Canada where chronically ill, disabled and mentally ill are included.</p> <p>Good palliative care would be hindered as in Belgium and Canada. Regarding the relevant medication, lethal unregulated doses of drugs being in people’s homes is dangerous anyway.</p>

Disagree	<p>As a Christian and accountable to God Almighty, I cannot and will not support assisted suicide - Commandment 6 - Do not kill (this includes self). Furthermore, the potential that this law will be altered considerably to accommodate radical ideas or visions of a future governing body, group, or individual is high. In other words, there is potential for abuse of society and the individual within. Therefore, control of this law is uncertain. Also, it is an unethical process involving irreversible decision making and consequences to those involved or made to be involved. Finally, health care has many ways of helping those who suffer, alleviating pain and distress with treatments and palliative care. Rather than focusing on, or supporting termination of people, authorities should improve access to treatments, palliative care and medicines.</p>	Not Answered	<p>It is an absolute MUST that any person drawn into decisions of assisted suicide, or people tasked with considering assisted suicide of an individual, can evidence that the individual has been given care and support experience of palliative care, treatments and other care options, and that all these options are available to that individual.</p> <p>I reiterate, as a Christian and accountable to God Almighty, I cannot and will not support assisted suicide - Commandment 6 - Do not kill (this includes self). Furthermore, the potential that this law will be altered considerably to accommodate radical ideas or visions of a future governing body, group, or individual is high. In other words, there is potential for abuse of society and the individual within. Therefore, control of this law is uncertain. Also, it is an unethical process involving irreversible decision making and consequences to those involved or made to be involved. Finally, health care has many ways of helping those who suffer, alleviating pain and distress with treatments and palliative care. Rather than focusing on, or supporting termination of people, authorities should improve access to treatments, palliative care and medicines.</p>
Agree		For over 5 years	
Agree	<p>I know of people who have struggled to get on a flight to Switzerland because of their disabilities and heard recently of a young woman who was aware that she had to go alone and couldn't allow her husband and children to be a part of it. She took herself off telling them she was holidaying with a friend; but had this been legal in England she may well have had an extra couple of years and been able to die with family around her, rather than in a distant corner of the world with strangers. Also at present it is not equitable; it is only open to people who can afford to pay.</p>	Not Answered	<p>I believe that people should have the right to choose. I used to sit on the fence, but now after caring for many people with progressive illnesses especially of the unusual neurological ones and some horrible lung diseases I strongly advocate this Bill. I do believe that it would have to be carefully policed and wonder if rather than in the patient's home it should be in a clinic setting? And if we had that would the Government consider opening it up to UK residents? Obviously then a charge would have to be incurred, so not sure if we can achieve this.</p>
Agree	<p>It is about basic dignity and alleviating suffering.</p>	Not Answered	<p>Not all pain can be controlled. This choice to some is very important but does not oblige anyone who doesn't want the choice to have it.</p>
Not Sure	<p>Terrified that it will deteriorate as abortion bill has to being unrecognisable to its initial Purpose. Other countries with this bill have witnessed abuse. How do we KNOW This won't happen here. Mankind does not have a great track record On truth and Integrity. If Isle Of man finances get worse you could decide it economically viable to advance the bill to 'get rid of' we old timers! Very very wary of making this law.</p>	For over 5 years	<p>Very scary. Once the snowball starts downhill it gets bigger and bigger. If this bill is passed.. even if it couches in caring terms.. which I doubt, it will ALWAYS become more and more flexible and abused. In Holland it has been used for youngsters who can't cope with life. Is this right? In other countries it is already being administered in bullying ways. Does our beautiful island really want this dark cloud hanging over us. Choosing to 'play God' in people's lives. I am Not sure how honourable are the intentions of the advocates of this bill. I only hope that your relations dont decide that your life is of no worth in the future and sigh the paper for you!</p>

Disagree	I do not believe that once in place the well meaning safeguards will not be progressively watered down. That the old, sick and vulnerable will not feel pressure (possibly self applied) to opt for assisted dying, rather than be a burden. That time thresholds may be extended, classes of qualifying ailments broadened. We need to strengthen hospice care provision (not leave it to a charity). This (indeed any) assisted dying bill is a Pandora's box and once opened it cannot be closed.	Not Answered	I have not answered some of the above questions as to do so could have been spun to indicate that I believed that legal assisted dying would be OK in some circumstances. We have all heard of cases where people have been forced to suffer prolonged painful deaths. The answer is not to make a quick and painless death available on the NHS, but to make really good palliative care freely available to all who need it on the NHS. By normalising suicide, it will inevitably become more and more common, not just for the terminally ill, but for the severely disabled or those with long term mental health issues, as an alternative to proper care.
Agree	Everyone should have the right to decide when and how they want to die.	For over 1 year	
Disagree	Assisted dying is not the role of healthcare. It fundamentally changes the role of the doctor patient relationship. We support development in palliative care and want to see advances and developments in healthcare services that make assisted dying unnecessary.	Not Answered	I am concerned that the Isle of Man needs to look seriously at what is happening in Canada. The warnings that have been given about the effects on the vulnerable are being played out. People who are living in poverty, have disabilities, are veterans and are vulnerable in other ways are being offered MAID as a "treatment". This is close to eugenics and will soon include people with mental illness as well. Is that really the type of society you want on the Isle of Man?
Disagree	<p>This proposed change in the law is unnecessary. suffering can often be relieved by good palliative care & support which helps patients & their carers to cope & find hope.</p> <p>This is unethical. Health care professionals have a duty first of all to "first do no harm". Helping to kill a patient goes against this. Many doctors have no wish to be directly involved in this. They may also have conscientious objections.</p> <p>This would undermine trust in health care professionals.</p> <p>This would open up a slippery slope which would mean further extension & weakening of protection of vulnerable patients would be uncontrollable.</p>	For over 5 years	<p>While Euthanasia & Assisted Suicide seems to have some powerful backers, it is open the door to a process that has been shown in other jurisdictions to be uncontrollable.</p> <p>It is also unethical as it goes against the duty of care of doctors to first do no harm. In Nazi Germany it led to the brutalisation of doctors & society.</p> <p>this change in the law is unnecessary. patients should access to good quality palliative care. Help needs to be offered to help them cope & to find hope through the care they receive.</p> <p>Patients considering ending their lives in this way, should have access to full psychiatric assessments & should have been helped access the full range of other options such as palliation etc.</p> <p>It is very difficult to predict when someone is truly terminally ill or at least within 30 days of death.</p> <p>Have lethal medication in people's homes is dangerous.</p> <p>In UK society as a whole suicide prevention is rightly getting greater emphasis. Suicide causes greater grief reactions to those left behind.</p> <p>It seems perverse to legalising suicide in this way.</p>

Agree	I fully support the proposal and would like to see it extended to cover those in intolerable suffering and incurable illnesses such as dementia.	For over 1 year	Stipulating who can access this service limits it greatly. It should be an option for everyone and cases should be assessed on an individual basis as they arise. Being too prescriptive is going to cause problems and discriminates against most of the population. For those who seem to think that older people will be made to feel a burden, they have missed the other side of the story. Some older people, myself included, do not want to be just kept alive in a home while their life savings are drained at a rate of 1k per week. If I were in this situation and had no hope of regaining any quality of life then I would rather be dead. I would prefer my children to benefit from my hard earned assets. Many relatives want to keep their older people alive beyond their wishes. Safeguards should prevent any gold diggers trying to bump relatives off and to be honest I think they will be very few. Even if there's one in a thousand then why should the other 999 be denied choice because of the few charlatans?
Agree	People should have a choice whether they live or die. Animals are treated better.	For over 1 year	
Agree	No one is forced to die, if the person who is terminally ill wants to die this must be treated as the person's last wish and must be able to do so legally.	Not Answered	I would like to see the medication delivered by an authorized person when the person is ready to take the medicine rather than the person or someone else collecting the medication.
Disagree	Assisted dying is both dangerous and unnecessary. It makes suicide seem a normal option and puts pressure on disabled people who may feel they are a burden. Pallative care is the positive alternative.	Other	Do not agree with 'assisted dying'
Agree	I believe that everyone should have the right to choose.	For over 5 years	
Agree	Having experienced close family members dying from terminal conditions and their wishes being expressed directly to me in agreement to assisted dying being an option they would have liked to have had, I am supportive of this in principal.	Not Answered	With this being such an emotive issue, I do feel that there needs to be a distinct process that has to be followed before the wishes are fulfilled thus removing any accusations of flawed decisions leading to incorrect deaths. This may not suit the circumstances and prolong the outcomes. Also, the decision to support or assist in any way should in no way be caught by any criminal proceedings. This must be sorted before any legislation is in place and there must be no oversight in any areas.

Agree	Having to continue to live when I am no longer present is my worst nightmare. I would like to know that if I had dementia and could no longer function, I would be allowed to die.	For over 5 years	Being able to have an advanced directive is key. On dementia diagnosis an individual should be encourage to create such a directive, with the support of two doctors and or a mental health professional as required at a later date. This directive could then be used when a individual loses the capacity to make decisions to allow for euthanasia without additional doctors having to sign off. I've ticked the box saying I disagree with the proposal.... Why are governments around the world so keen on killing people, aborting them or killing those who are "Terminally ill"? So called Socialists seem to be at the forefront of this. Assisted dying was introduced in Germany under the National Socialists in the Thirties, why are we emulating this? In Canada their original law was "extended". As a consequence, a Paralympic champion was offered assisted dying because she had problems getting a chair lift installed. Of course, this sort of thing could never happen here, Canada is a wealthy First world country with a caring, popular Prime Minister...
Disagree	This survey is asking for a response from overwhelmingly healthy people. The next six questions , 9 to 14, assume this question has been answered agree, or not sure.	Not Answered	
Agree	People should be allowed to die with dignity	For over 5 years	
Agree		For over 5 years	The island should not be allowed to become an assisted dying venue for non residents or island residents relatives who live off island, it would pose to many risks to out community and reputation.

Disagree	<p>I believe that any such law is uncontrollable, it is like laws elsewhere in the world likely that the criteria will be extended over time, and also like that 'controls' in abortion legislation that the agreement to assisted dying will become normative to simply agree to the proposal.</p> <p>Secondly, the doctor patient relationship will be harmed if it is known that the doctor is the one who prescribes legal death inducing drugs, rather than trying to save life and minimise suffering through pain relief.</p> <p>Thirdly, the legislation is not required, as the pain for most conditions can be controlled, and palliative care continues to improve.</p> <p>Fourthly, the practical provision envisaged is unrealistic. The lethal drugs prescribed could easily be given covertly by others to the person they are prescribed for, this is likely to be difficult if not impossible to detect. Also, these items could easily be taken and used on others.</p> <p>Fifthly, having seen the attitude of some family already to an elderly or infirmed person, in term of the person being manipulated to feel guilty about spending the children's or other family members inheritance in Nursing / Residential care this pressure is likely to increase, leading to people being guilt tripped as they are 'in the way'.</p>	Not Answered	<p>I have deliberately skipped some questions above as they may imply agreement for the proposal. To be clear, I oppose any proposal to bring in assisted dying legislation in the Isle of Man. In addition to my arguments above I believe that the introduction of such legislation will materially affect the safety and wellbeing of older residents, the disabled and possibly those suffering from mental illness. Already many are deemed to have capacity to agree to admission to care homes or hospital when it is convenient to do so, leaving many illegally detained. It is therefore likely that the same will happen should this legislation be brought in.</p>
Disagree	<p>Could be open to abuse or an alternative to a depressive person who feels there is no hope. People might want to come to the Island to end their lives here.</p>	For over 5 years	<p>This consultation makes me feel sick at the thought of what might happen if it is abused. I've seen people struggle at the end of life, it's soul destroying but to aid their death, I personally couldn't live with myself. It's so upsetting. We follow the UK with everything, why have they not implemented this? It's so wrong to me but I can see it might be a relief to no hope and living with unbearable pain. It's just my opinion. I would hate to live on an Island that allows assisted death as a normal procedure and my family go back generations. We want to be a tourist resort with good reviews not a resort where people come to die. It certainly won't be the fantastic TT any more, a new vision might emerge.</p>

Not Sure	I prefer to give my opinions after Q28.	For over 1 year	Whilst I fully accept that there are rightly concerns to protect the vulnerable, I CANNOT accept that a society (of any nationality) can rule against assisted dying and condemn an elderly terminally ill individual to live on with prolonged agony and anguish until a 'natural' death occurs, while, at the same time denying parents of a young terminally ill child the right to take him or her out of hospital to alternative care which MIGHT save his or her life. There are regular reports of the latter occurring and from a CHRISTIAN stance, the two situations do not make irrelevant comparisons.
			ALL HUMAN LIFE IS SACRED!
Agree	Gives dignity, choice and relief to the person feeling this is the route they wish to take.	Not Answered	
Agree	A belief in the individuals right to control their own death.	For over 1 year	
Agree	It's just fair, if someone is in a position where there is no medical answer.	For over 5 years	How would you feel in their situation.
Agree	Everyone should have the right to die with dignity if they are in severe pain and disability if they have a terminal diagnosis.	Not Answered	
Agree	Quality of life above quantity, the outdated morality of somebody else's imaginary friend does not apply to me, and not should it impact my (and others) options when it comes to end of life.	Not Answered	Mental health should be an option as well, somebody living in mental anguish should have this option. See https://en.wikipedia.org/wiki/Noa_Pothoven she suffered needlessly due to a system that did not support her wishes, we should do better.
Agree		Other	Not sure they should need to be residents
			Concern regarding how long the process would take once the person has decided that they want to end their life. We already have extensive waiting periods and bottlenecks.
			Concern regarding end of life medication being distributed and stored outside a medical facility in case it was abused.
Agree	I believe that people should have the right to die with dignity.	Not Answered	My concern is, that the process, as proposed, seems to be taking a lot of doctors' time, and doctors are extremely busy already.
			Additionally, why are assisted suicide and voluntary euthanasia not put forth as discussion points in this consultation - there is surely enough interest in those too?
Agree	Anyone should have the right to choose a 'good death' -see definition below. A dignified, peaceful end to life is far better for the person and for those they leave behind.	Not Answered	It should be clear in the legislation that provided the process is correctly followed that family members or any attending healthcare professionals are immune from criminal prosecution. This should also be the case where the patient is not IOM resident.
	Institute of Medicine's Definition of a 'good death' is “one that is free from avoidable distress and suffering, for patients, family, and caregivers; in general accord with the patients' and families' wishes; and reasonably consistent with clinical, cultural, and ethical standards.”		Should a patient may become uncommunicative, i.e unconscious or similar which prevents them from giving 'final consent' just before a scheduled euthanasia and if signs of suffering remain, the person tasked with performing euthanasia should be able to proceed, despite the patient’s lowered consciousness.

Agree	For those in pain with no chance of a cure they should have the choice to end it humanely and legally	Not Answered	
Agree	Assuming the correct structures are in place to ensure that this is 'safely' managed	For over 5 years	
Disagree	This whole concept is against God's laws. Life is a sacred gift and only God should determine when someone should die. Governments or individual medical practioners, politicians or anyone one else should not take upon themselves to judge whether or not a life is worthwhile. The Bible is clear in this and leaders should know their Bibles and adhere to it's teaching. Changing God's laws, commandments and statutes is a sin.	Not Answered	
Agree	An adult of sound mind, having been fully informed of their medical condition and prognosis, should be allowed both the dignity and choice over their own life to make such a decision to request assisted dying. This must be one if not the most difficult decision any human can make, to make the decision to know that their decision will end their life, and both making and wanting to make such a decision must be telling as to how horrible either their current or soon to be situation must be. Imagine being in such a medical condition that you feel the best way out considering all implications is to end your own life. I feel this decision will absolutely not be taken lightly by anyone, and a person should have the right over their own body to make such a decision knowing that is the inevitable outcome in the not too distant future and will save both that person and their loved ones serious emotional distress and possibly physical pain to the patient. On that basis my view is that any adult is this position, should have the right to make the decision to end their own life, with dignity.	Not Answered	
Agree	I disagree with forcing terminally ill people to undergo potentially painful and repetitive treatments to sustain life when they would prefer to make alternative choices.	Other	Should not have to be permanent resident I believe choice is the key priority for this topic. People should be supported to take an informed decision about whether and when they wish to end their life. Once that difficult decision is made and necessary safeguarding approvals are received they should not be forced where, when or with who to end their life. If they want to be with family in their own home or in dedicated facilities should be their choice. Similarly the presence of a healthcare professional should be their choice although I think there should be a notification process that once life ending medication is taken, someone must ensure the person is visited within an appropriate time period if notification of death is not received. Dignity, respect and individual choice must be the key points to this process.

Agree	<p>It is the concept of self determination. If you look at the policy of the leading suicide prevention charity Samaritans they believe it is the will of the individual. It is our fundamental human right to choose if we wish to live or die particularly if we have a safeguarded and resounding diagnosis of a terminal illness or degrading condition such as MND. To allow a family to support the individual to choose their death will give so much more dignity to the individual and even perhaps prevent them taking matters in to their own hands to suicide which is then more difficult for the families during inquest, etc. This will then prevent unnecessary criminal proceedings and allow more dignity to the individual and their loved ones in their difficult time.</p>	Other	<p>I would like to come back to the Island to die if that was available to me (ie not available in the UK) as I have prepared my ashes to be scattered there also.</p>	<p>please allow this dignity to be available to us all.</p>
Disagree	<p>I am very worried that elderly, vulnerable and infirm people may be pressured into giving up on life. I am sorry some relatives might not display the best motives when it comes to caring for elderly family members. I am fearful that this will open the door to a ruling which could be misused against the most vulnerable people in our society.</p> <p>I don't think safeguards to prevent this can ever really be enforced or work effectively.</p>	Not Answered		<p>Refer to my answers given to Question 8. This is not a piece of legislation that I can support.</p>
Disagree	<p>I do not believe assisted dying is the right thing to do and think that palliative care is a better solution. There are far too many concerns and the policy would be wide open to abuse.</p>	Not Answered		
Disagree	<p>I know lots of terminally ill people that have had a change of health and gone onto live many wonderful years. One lady met her grandchild and another person I know after a bleak diagnosis lived 2 more years and got to see his daughter get married and danced with her at the wedding.</p> <p>I remeber he mentioned his condition was painful and felt like a burdent to the family.. but what a loss it would have been had he been given this bed emptying easier route. He was very happy he lived to see that day.</p> <p>There is a big difference between choosing pallative care (do not resusitate) already in place and legally speaking: committing suicide or asking a hospital worker to commit murder.</p> <p>This is being dressed very nicely, but taking a pill to end your life is suicide and asking someone to end your life for you is murder.</p> <p>If the person is terminally ill they will die when the time is right. Every hour is precious as mentioned in the Isle of Man anthem.</p> <p>Nazi Germany practices assisted dying and it also started with an innocent bill like this.</p> <p>Further questions in this survey are unethical.</p>	Not Answered		<p>NO to Assisted Dying</p>

Disagree	<ul style="list-style-type: none">- impossibility of setting definitions that are clear and can be implemented effectively- burden, trust and integrity of doctors in the process- inevitable scope creep of legislation in practice (as evidenced elsewhere)- protection of those with disability, mental illness or crisis- need to place greater focus and investment on providing excellent palliative care	Not Answered	<ul style="list-style-type: none">- this consultation is heavily weighted to the assumption of support and, therefore, the process rather than agreement or disagreement- the outline process is ill-conceived, too wide and carries too many assumptions- I see no way that this legislation can be safely drafted and passed without putting both health professionals, 'clients', vulnerable individuals and families at risk- I would rather see Tynwald focus their attention on the provision and support of excellent palliative care for all- all of my comments in section 8 summarise my concerns
Disagree	I think it is morally wrong. I've had family and friends die of cancer and MND and palliative care was brilliant. I see no place for this and believe strongly against it, it shouldn't be permitted under any circumstances.. peoples pain can be controlled and minimum intervention given to prevent life being prolonged but I believe strongly that the process from life to death should be a natural process.	Not Answered	<p>Much of this survey is biased towards consent of this process. I have chosen not to answer many of the questions as I don't agree with assisted dying. I would suggest that that may be true also for people who have felt compelled/manipulated to answer the questions in the survey as there are no available 'not applicable' options on the multi choice questions and people have felt obliged to tick an option when they clearly believe the event should not be permissible in the first place.</p> <p>This survey should be scrapped, poorly conceived IMO.</p>
Disagree		Not Answered	
Disagree	<p>My views on the subject are totally in accord with GP Fiona Baker and palliative care specialist Ben Harris (as featured on the front page of the Manx Independent , Jan 5 - 11, 2023).</p> <p>Although not belonging to any organised religious group, I believe in the sanctity of human life and that if someone is terminally ill, the emphasis should be on palliative care, not on helping them to die.</p> <p>If the Bill was passed, I believe it would dangerously tilt the emphasis towards assisting people to die, rather than preserving life with dignity. It would open the floodgates to mis-use and, as the above learned medics point out, assurances and guarantees would quickly melt away.</p> <p>It is certainly of sufficient importance to our society that a referendum be held, to accurately assess the view of the public.</p>	Not Answered	<p>I have not answered the majority of questions in this consultation because I feel they are heavily weighted in favour of the draft Bill.</p> <p>I am totally opposed to assisted dying, believing it to be morally corrupt and not what the majority of people in the Isle of Man would wish to be associated with.</p> <p>Furthermore, it worries me that this Bill is being presented by a medical practitioner who is also an MHK. As we all know, the medical profession are generally held in very high esteem and few of us would actually argue the toss on any medical matters with our GP. This gives the proposed Bill an unfair advantage.</p>

Disagree	<p>I do strongly object to the introduction of this legislation. Palliative Care on the Isle of Man is second to none. It appears that many doctors also object and their reasons are many and varied. Many elderly people have spells of slight and sometimes undiagnosed depression and could easily choose this “irreversible “ course of action in haste. Yes I know that a number of “enabling criteria” are proposed however we only need to look at other jurisdictions which have introduced this to see how easily they have been eroded. My mother was a fit lady who worked well into her 80’s, contributing to society and the economy. She died last year at the age of 94! Mums experience of her later times was a mixture of highs, where she loved seeing us, her children, her grandchildren and still a number of friends, during this time she sometimes said that she didn’t want to be a burden to us and would possibly have felt obliged to end her life. This would have been awful for her and our whole family. Mum passed away relatively quickly last year after losing her husband per 40 years previously and although so distressed at her loss then, lived to see both sons married, six grandchildren and five great grandchildren. What a wasted life had she chosen to end it earlier!</p> <p>I feel that this change is uncontrollable, unethical and unnecessary as we have wonderful health and palliative care.</p>	Not Answered	<p>Coercion and Conscience spring to mind</p> <p>I feel the Current law is adequate due to palliative care and ongoing advances in this area.</p> <p>I am concerned about Vulnerable people eg dementia. I understand there is a Dutch example where a person was “held down” while drugs were administered and the outcome of trial of the doctor later concluded that this was fine!!!</p> <p>Once introduced this will be Uncontrollable eg the extension of law to include so many variables is a certainty. Again just look at other jurisdictions!</p> <p>I believe that doctors agree it is impossible to accurately predict life expectancy so any time frame is at best a rough guess therefore not a good basis for law making.</p> <p>Again your wording in question 11 - unbearable- is so subjective and can certainly be “off the moment “</p> <p>Question 12 suggests an age limit, again this has proven to be un-enforceable in other jurisdictions when age limits have been changed once legislation is enacted some now include minors! How appalling. Any residency legislation is open to abuse, the term “suicide tourism” is well known and again where supposed safeguards have been in place, they have been changed.</p> <p>So many of these questions rely upon the strength of any introduced law and it can be clearly seen from other jurisdictions this cannot be relied upon. We must learn from others experiences.</p> <p>The “two doctor “ rule again is unreliable, the mere fact that this legislation is proposed means at least one doctor would sign a consent form so possible candidates only have to “shop” for one</p>
Disagree		Not Answered	
Agree	<p>I have watched multiple family members go through traumatic drawn out deaths - one that took over 10 years, 10 years of that family member begging us to kill them as they had no quality of life. The trauma of that is life long for me. If I ever found I had any form of life limiting illness then I would currently view suicide as my only option and if I could do it then I would. That should not be the case</p>	For over 1 year	<p>This is needed urgently. Doctors should be able to opt out though rather than potentially deliberately prevent someone from accessing this option as could happen.</p>
Disagree	<p>The evidence from other jurisdictions, which have allowed assisted dying shows that the safeguards initially put in place are eroded over time. Equally, it is almost impossible to say for certain that someone will die within a given time period.</p>	For over 5 years	<p>This survey is slanted towards agreement with Assisted dying. If one disagrees with assisted dying, it is almost impossible to answer the majority of questions in this survey.</p>
Agree	<p>The primary purpose of assisted dying should be that autonomy and dignity is granted to the individual in times of extreme suffering such as terminal illness.</p>	Not Answered	<p>I feel a healthcare professional should be present throughout the process.</p> <p>Healthcare professionals who work in this area should be provided with the appropriate specialist support.</p>

Agree	I believe the right to your own life includes the right to choose how it ends. Brutal as it may sound, any physically capable adult could walk off a cliff or into the sea any time; their choice in the matter is simple fact, not moral opinion. Thus, to deny a person who has lost the physical capacity for doing so the right to an analogous option, when they face the certain knowledge of an imminent and less welcome end or an unbearable continuity, seems cruel.	Not Answered	I believe objections of close family to assisted dying should be taken into consideration when considering the need for psychiatric referral. In other words, the earnest wishes of close family against such a procedure merits additional attention and care. I believe medical professionals should NOT be allowed to propose assisted dying as an option unless the patient has enquired him/herself. This avoids insensitive suggestions as well as potential accusations of pressure from professionals (as have garnered significant attention in the Canadian system, for example). I believe the protections for conscientious objectors amongst medical professionals should be absolute, clear, and eternal. There must be no grey area there. I also believe that special psychiatric pre-assessment and aftercare should be required for any medical professionals who actively participate in administering the drugs, if that capability is included in the bill. Since no other feedback box is available, I'd also like to add here that while I do favour the proposal on balance, I think the relevant Department should be absolutely ashamed of the partisan way this consultation has been written. While the introductory text is thorough and does mention reservations by certain groups, it is clearly written to favour the proposal, which is wildly inappropriate for any kind of honest research, but particularly odious in the case of such a topic of conscience.
Agree		Not Answered	
Agree	If the latter days, weeks or months are going to be either hospitalised or in any way non dignified or distressing assisted dying should be an option. Also, if an individual wants to go, they should be allowed to make that decision.	Other	
Agree	If I was terminally ill and in severe pain I would like to have the choice to end my life.	Not Answered	
Agree	Having been a GP for 45 yrs it is obviously clear to prolong suffering in those terminally ill is not the correct action ,and at times the pain & distress cannot be relieved so if a person wishes to be assisted in dying then that should be permitted .	Not Answered	I would like a doctor or health care professional to be responsible for procuring the medication and keeping it and supervising the administration . I am uncomfortable with a lethal dose of medication being kept in somebodies house which could be given to anybody for whom it was not intended .
Agree	No one should have to leave this Earth Suffering the way my son suffered he died from Cancer "Squamous Cell Carcinoma" he was being eaten alive inside his Body and around his neck on the outside of his Body He died an Agonising Death he suffered right to the end of his life we should have the right to "Choose How and When we Die"	Not Answered	Yes do an Annual report on how many people have chosen Assisted Dying but there is no need to publish the report
Disagree	Life is sacred Would be less need if we had adequate palliative care Certain groups of people may feel obliged to undertake assisted suicide	For over 5 years	

Agree	This should not be restricted to the terminally ill.	Not Answered	
Disagree	Voluntary euthanasia should also be included. I am a GP and have cared for many dying patients and their relatives. Death, like birth is not always simple or easy, but good palliative care is the imperative with compassion. Assisted dying is very risky - the unknowns of timing and uncertainties of diagnosis and prognosis can potentially pressurise people in to proceeding and shortening their life unnecessarily. In addition there would be a huge potential for people opting to die to avoid being as they thought, a burden to others, or indeed, being under some coercion, intentional or otherwise. There is also the likelihood of incremental 'mission creep' with extension to other circumstances, such as chronic illness, mental illness and disability.	Other	AT least 20 years - to avoid suicide tourism or migration. IT is very concerning that the current severe problems affecting the NHS may in turn lead people to consider the option of assisted dying - especially the temptation of political pressures to offer this option with the hope of cost savings. It is therefore extremely important to protect the entire population by not changing the law. Assisted dying would open the floodgates of pressure for people fearful of lack of available care or being a burden to opt instead to remove themselves. Any law change should rather be to strengthen the availability of good palliative care and social care provision for those in need, and to protect against subtle coercion.
Agree	If a person reaches a time/stage in their life that they no longer wish to live with a terminal illness, who are we to deny them that option. I would like to have the choice.	Not Answered	
Disagree	It is much safer , kinder and better for patients and their families to be treated with palliative care and have all the time they can to say their farewells. It also prevents vulnerable older people being coerced into dying a painful undignified death just to save money.	Other	At least fifty years - we do not want to be known as the Isle of Death . It is improper and probably illegal to force medical professionals to kill their patients +0- they have signed the Hippocrates oath to preserve life. No one has the right to terminate life by any means or method . Life is a gift from God , your parents and you should be able to live as full and happy a life as possible. It makes more sense to encourage and assist people to have healthy lives, have sufficient nourishing food, good health care and support than to push the unwanted lonely , old to commit the crime of suicide .
Agree	People who are terminally ill lose a lot of control from their lives. The very least we can do is give them one way to control how they will die. And potentially, help them end their lives before they progress to the point where they lose their mental capacity, their memory and their dignity.	Not Answered	 I am pleased that this bill is being discussed and that the public have an opportunity to respond to it. This is an important issue that I think has been shunned for too long.
Agree	Quite apart from what has already happened in Holland and Belgium, my serious objection to any kind of suicide is based on my belief in God. God is our creator and our life does not belong to us but to him. We are meant to suffer in this life because it is a broken world we live in. There is no doubt in my mind that once people decide to turn against God's commandments, in particular THOU SHALT NOT KILL, it will lead to their bitter regret later on. God is perfectly wise and his commandments are to be obeyed.	For over 1 year	
Disagree		Not Answered	
Agree	I am a medical doctor, now retired. I have long been of the opinion that it is inhumane to force a terminally ill person to continue to be suffering with a terminal illness, or an illness from which there is no prospect of recovery, as long as that person expresses a desire to end his/her life.	For over 1 year	Question 25 is very difficult to answer objectively. It would depend on the circumstances, the amount of emotional stress being felt by any present relatives, the wishes at the time of those relatives. The healthcare professional administering the medication should be free to make his/her own decision at the time. Some relatives would wish to be alone with their loved-one in the last moments, others would need a great deal of support.

Disagree		Other	Be a resident for atleast 5 years and have been employed here for atleast 5 years, and have local family who have also lived here for atleast 5 years.	
Disagree	The life should not be terminated in any circumstance	Not Answered		There should not be assisted dying. Terminal care as it stands is enough
Agree	People have rights for most things in their lives....this should be one of them.	For over 5 years		Even with improved specialist palliative care, some dying people will still experience severe, unbearable physical or emotional distress that cannot be relieved. Forcing dying people to suffer against their wishes is incompatible with the values of 21st century. Having seen my own mother suffer so much when she was moved into a nursing home where she was often sedated I knew that she wanted to be put to sleep for good. She should have had a choice. She was a wonderful woman, intelligent, clever and had an amazing sense of humour. When things deteriorated health wise for her she suffered all the things she had told me over her last years that she would dread. I had to stand by and watch it all happen....therefore in the end we both had to endure the agony! She's been gone 5 years and I still think the same way. I hope things change soon.
Agree	Having watched my mother linger for a number of days more than was necessary	For over 5 years		I see no point in prolonging suffering when there is no change of survival.
Agree		Not Answered		no

Disagree	I am more in favour of assisted living and feel that when a person s terminally ill emotions are under great stress. relatives and friends should receive more support for them as they care for the ill person.	For over 5 years	<p>As I am against assisted dying in principle I cannot comment on inclusions to a Bill. The Medical profession is pledged to saving life; doctors work to this end. Palliative care in IOM and UK is exemplary.</p> <p>To maintain the high quality care for an ageing population we need investment in small care homes, hospices and hospitals..not reduction of the numbers.</p> <p>End of life decisions are emotionally loaded; sufferers do not want to see carers under pressure; carers would not want a loved one to choose an earlier death for their benefit.</p> <p>Putting end of life medication into the hands of the public would seem highly dangerous. No doubt a supply market would emerge on the internet.</p> <p>So many people have mental health issues; but for most things change, crises times lessen or are managed. If assisted dying was offered to such people it woud alleviate the Health Service , the medication bills, Support Units, staffing etc..But a person would have ended their life prematurely , distressed their families, friends.</p> <p>Chronic pain and a terminal diagnosis is terrible but several friends and one in particular fought to live for her children, with dignity, to the end. She broke all records in the Hospice, to see her teenagers flourish and to celebrate her 50th birthday.</p> <p>She did consider refusing chemo etc at the start of her illness but live another 5 years, bravely and cheerfully....for herself and for those she</p>
Disagree	I believe that there are those who would feel that they are becoming a burden to others and should go down the route of assisted dying when they are not really in agreement. I also believe in the sanctity of life.	Not Answered	
Disagree	While I don't hold that human life should always be continued or prolonged in all circumstances of suffering, I am concerned that assisted dying would involve an unacceptable risk of people feeling obliged to end their life in order to avoid being/ becoming a burden to others - even if this perception is an unreal one. This risk is heightened for vulnerable people. Palliative care offers an excellent alternative.	Not Answered	
Disagree	I believe that assisted dying for the terminally ill is the thin end of a wedge. There may be current safeguards before the process occurs but these can be eroded over time.	For over 5 years	<p>There has to be consideration if the person is being put under pressure from the family re assisted dying.</p> <p>Look at Canada's Medical Assistance In Dying (MAID) programme.</p> <p>3.3% of all deaths in Canada were by MAID whereas legislation assured Canadians it would be rare. As I mentioned the Assisted Dying bill could have far-reaching consequences.</p>

Disagree	<p>The law,at present prohibits intentional killing by act or omission.</p> <p>The prohibition of killing promotes a solid basis for trust of people in the role of caring for patients and protecting them from harm. This prohibition is vital, both instrumentally and symbolically, and its removal would weaken a set of practices and restraints that we could not easily replace. As an opponent of assisted dying I would contend that there is no guarantee that assisted dying will always be strictly voluntary. Although proponents of assisted dying would argue that carefully drawn laws and the use of balancing tests can effectively eliminate such concerns it is easy to imagine scenarios when these safeguards could fail. The potential for subtle coercion would threaten from many directions. For instance: -</p> <p>The provision of assisted dying presided over by doctors would serve to destroy the ethical image and trust of the medical profession. So that people would become frightened of their doctors and would no longer view them as friends and helpers, but as potential enemies.</p> <p>Elderly and disabled patients with terminal illnesses are invited by some among our achievement-oriented society to see themselves as a burden to younger, more vital generations. In this climate, simply offering the option of "self-deliverance" shifts a burden of proof, so that helpless patients might ask themselves why they are not availing themselves of it. This situation might lead some to "voluntarily" decide to end a life that is perceived as worthless.</p> <p>It is possible that members of an ill persons family faced with the overwhelming burden of caring for that person could unconsciously impart a feeling of worthlessness, thus hastening a "voluntary" decision toward euthanasia.</p> <p>Ever growing incentives from governments and insurance companies for</p>	Not Answered		<p>As a person who is fundamentally against a change in the law which prohibits intentional killing, I was only able to answer two questions after the introduction page all other questions assume agreement on the principal. This consultation has been designed to only highlight support for the proposed change in law. So my opinions will not be recorded properly when the results are analysed and published.</p>
Agree		For over 5 years		<p>In any discussion of Assisted Dying, it is too often glossed over that the process of dying, in many cases, is a pretty unpleasant business.</p>
Agree		For over 1 year		
Disagree		Not Answered		
Agree	<p>People should be allowed to make this decision. I am 65 years old and I would like to be able to leave my wishes now, about assisted dying incase I ever become so ill that I could not communicate, or have a terminal illness .</p>	For over 5 years		
Disagree	<p>God is the one who gives life and he is the one who can take it away. It has always been the case that if you take some ones life or help that person to take their life then there is a penalty for doing that very thing, which is correct, so how all of a sudden it can change just because the government changes the law but as always it is murder to take some ones life no matter what.</p> <p>No matter what you call safe guards that are put in place they will be eroded over time and more and more people will be drawn into this assisted dying category which is really suicide. or in reality Murder.</p>	Not Answered	<p>I have not ticked 13 or 14 because i am against all of this</p>	<p>My opinion is do not do this horrible thing. God is the giver of life and he is the one who can take it away.</p> <p>If this goes through then God will punish the Isle of Man . Seems now on this Island we are becoming a culture of death, we have made abortion legal now we want to make suicide legal wow how much further into the abyss are we going to go?</p>
Agree	<p>I strongly feel everyone should have the right to end their life when they choose especially if they have a terminal illness, no one should be made to suffer unnecessarily</p>	Not Answered		

Disagree	1. This will be uncontrollable 2. I strongly believe this unethical, and 3. It is unnecessary. More effort should be placed on providing palliative care	Not Answered	As I have mentioned before, this Bill will be uncontrollable, it is unethical and unnecessary. More effort should be placed on providing palliative or end of life care.
Agree	In life we have the opportunity to live it according to our wishes within the constraints of law and we should similarly be able to chose how we end life in given circumstances.	Not Answered	
Agree	It should be within your right to end your pain, or if you are terminally ill, it should be possible for you to decide when you will pass - your right to take responsibility.	Not Answered	
Agree	Modern medicine can keep people alive beyond the stage of an acceptable quality of life.	For over 1 year	I am unsure about whether the section referring a patient to a psychiatrist in the case of doubtful capacity is a suitable option. The process would add a great deal of distress to an already highly stressful situation.
Disagree		Not Answered	
Disagree		Not Answered	
Disagree	Our son has lived in Canada for over twenty-five years and the Canadian situation is very disturbing. When it became law in Canada, safeguards were put in place, all of which bar one have gone. Those with PTSD, young people with history of depression, anorexia, even the homeless may be offered a “gentle and kind exit” from life. Assisted Dying is part of the palliative care budget in some provinces and those with terminal/chronic illness may be advised that, while they cannot be guaranteed a pain-free death or a bed in a hospice, they can be offered a lethal injection. There are sad cases where death was neither easy nor pain-free. I lived alongside my own dying brother in a side ward over the days of his passing and his was not an easy death. Yet in my heart I know that “hard cases do NOT make for good law”. As a student in Germany many years ago, I marvelled how a nation that has given us so much culture could have fallen so deeply into such grave inhumanity towards other human beings. History tells us that we have to take the “long view” and at what point might we start to weigh the value of a human life according to whether that person is productive in society or not, the intellectually challenged, the physically disabled, those with long-term costly medical conditions, the elderly and the infirm - where would it stop in these days of economic challenge. I believe that all life is sacred and it is not for to decide when life ends. But we have told our family that, in the case of serious physical trauma that would leave us diminished, we do not wish for over-intervention, only to be kept comfortable and to allow for the natural process of dying. But that is a far cry from lethal injections.	Not Answered	Personal concerns given in question 8: There will be the potential for elderly, infirm dependants deciding to end their lives as a kindness to their families. There are huge issues around the rights of personal conscience. I also object to the euphemistic language of "assisted dying" which is, in truth, "assisted suicide". As mentioned in my response to question 8, our son has lived in Canada over 25 years and has witnessed the abuse of the system which is now widening to include many who merely require additional support. I fear for the vulnerable, those with profound disability, physical and mental, who are not "productive" members of society. I am struggling to believe that it is a doctor who has taken the Hippocratic oath who is attempting to bring forward this legislation. The UK does not endorse this practice so why is the Isle of Man Government even considering it?

Disagree	<p>I feel like it would be a slippery slope if we were to open the door to assisted dying. As we have seen in Canada as they have continually extended their laws so now many have access to assisted dying when there actually may be a wide range of options to help them without needing assisted dying. Additionally assisted dying was to be allowed on the IOM we are essentially giving a doctor the duty of killing a patient.</p> <p>Another aspect is surely dying should never be a last resort should we not invest in our palliative care so that terminally ill adults can die in a dignified and peaceful way naturally rather than assisting the process to help them die? Can we not let nature take its course and assist them without killing them?</p>	For over 5 years		<p>I feel like we should invest in our palliative care for individuals who are terminally ill. We can never fully, 100% guarantee someone is going to die at a certain time. I have seen friends who have been declared terminally ill due to cancer yet they are now living cancer free. Assisted dying should not be the solution to this issue and it is not the only dignified way to die we can help these adults by caring for them and investing in there care so they can pass away in a dignified and peaceful manner.</p>
Disagree	Everywhere this has been implemented, including Nazi Germany, early stated limits and controls mooted at the start were gradually forgotten.	Not Answered		
Disagree	Disagree as an individual and a past cater for 12 years	Not Answered	Don't agree	<p>This is awful. Awful for their loved ones.</p> <p>Totally disagree. It's a good way of getting rid of the older post war generation and saving money giving them pensions etc We have the right to decide how we will die</p>
Agree	My body my life	For over 5 years		
Agree	Everyone should have the right to take the decisions that matter most in their life including the right to decide when their life should end.	For over 1 year		
Disagree	<p>The details of any bill will be so complex it will introduce unintended consequences</p> <p>The Isle of Man risks becoming a Switzerland for uk residents due to reciprocal health agreements</p> <p>It puts doctors in morally difficult situations</p>	Other	40 yrs	<p>The questions are loaded forcing a positive response to some questions that assume assisted dying is approved</p>
Disagree		Not Answered		
Agree	Having watched a close family member die in horrendous pain then I agree to assisted dying.	Not Answered		
Agree		Not Answered		
Disagree	Morally ambiguous and could lead to killing people to ease burden on resources rather than as an act of compassion	Not Answered		Did not do it
Agree	Giving people more choice can only be a positive move	Not Answered		
Agree	The purpose of this proposal is to provide terminally ill, mentally competent adults the ability to choose how they pass.	For over 5 years		<p>Not comfortable with the idea of the medication being out of professional hands at any point.</p>
	It does not take away the option of palliative care, only provides the patients with more options.			
Agree	More choice is better	For over 1 year		
Agree	A person should have the choice to end their life if they are terminally ill & will suffer, regardless of palliative care.	For over 1 year		
Disagree		For over 5 years		
Agree	Everyone is entitled to their own choice as to how and when they go when facing end of life care	Not Answered		

Agree	Having watched my father die with lung cancer it was a horrific end, for him, my mum and me who witnessed it. My mum was also in unbearable pain for a long time before her passing and stated many times she wished she wasn't alive.	For over 5 years	
Agree	I have supported the concept of Assisted Dying for many years, as did my parents and grandparents before me.	For over 1 year	
	I support the organisation Dignity in Dying.		
	I believe that each person has the inalienable right to end his or her life as he or she chooses. This belief is entirely compatible with my Christian belief in God.		
	I consider it indefensible that anyone should seek to stop me ending my life if I am in extreme incurable pain.		
	As has been asserted many times, in the Isle of Man we do not condemn animals to end their lives in incurable pain and suffering and logically we should not condemn Manx residents to end their lives in incurable pain and suffering.		
Agree	Choice to individual, own body, own choice. Inhumane to reject this, there is nothing to gain by preserving the life of suffering.	For over 1 year	It should always be personal individual choice and be allowed to be dignified and as the person would choose.
Agree	There is nothing wrong with having a planned pain free death when an individual is ready to go and nothing more can be done medically for them. A person should be allowed to slip away peacefully and be surrounded by your loved ones	Not Answered	A video of a person wishing for assistance in dying should suffice.
Agree		Not Answered	
Agree	It's the free will of the person. People have the right to decide	Not Answered	
Agree		Not Answered	
Agree	I think people who are terminally ill should be in a position to make their own choice. Not to have to go through palliative treatment.	Not Answered	
Agree	People should be able to choose during ill health	Not Answered	
Agree	I have watched friends and family die in agony, begging for release yet I am allowed to put a loved pet to sleep when nothing else can be done for them. I would be prosecuted for keeping said persons in the same suffering as my friends and family were in. My Mum died from MS- she asked to be put to sleep- they couldn't help her. My Gran died horribly from cancer. No help yet even on max pain relief she was still in agony. It is 2023 not the 19th century!	Not Answered	Question 9 is flawed. There is an answer missing from the choice. No I feel this survey is incomplete and some of the questions need more choices of an answer, consequently I am being steered into giving an answer that is other to what my complete views are, giving you an incorrect answer (or coerced via the answer given as a choice) Re think and re ask the survey. Give ALL relevant options as an answer. But let me be clear, assisted dying must now be supported on the Isle of Man. No matter how you word your survey and answers to same
Agree	I would not let an animal suffer so why would I want a person too?	Not Answered	

Agree	As long as strict protocols are in place I absolutely want the right to choose to die should I be in constant pain. 6 months ago I discovered I have a benign, Glioma brain tumour, no symptoms and it has not grown or changed but should it do so and I would like to think I have a choice.	Not Answered	
Agree	<p>I sat with my brother whilst he died from a terminal cancer under the Liverpool Protocol. I consider the Liverpool Protocol to be cruel and barbaric. He starved to death over a period of weeks whilst his wife, other family members and visiting medics administered “just enough” morphine to smooth the agony.</p> <p>Ten years previously, my brother had been at my father’s bedside, who died in similar circumstances. My brother was haunted by the memory of watching our father die. The long nights of rattling breathing whilst reflex system kept his physical body alive. My brother knew what his death would be like. He resolved “to go quietly” but he was greatly saddened that he had to go through the same process as dad.</p> <p>Under the current law, this is the best death the terminally ill can hope for. We can, and must, do better.</p>	For over 1 year	<p>The Liverpool Protocol is a form of assisted dying, albeit a cruel process for both the patient and those close to them. We assist death by withdrawing nutrition and feeding the patient with morphine. I believe it is far kinder to allow the terminally ill who wish to die with dignity the means to do so.</p>
Disagree	Human bears God’s image and it’s not for us to terminate	Not Answered	I’m against of assisted dying and euthanasia and should not be included in the draft bill
Disagree	<p>Strongly feel that perceptions of being a ‘burden’ will influence individuals unfairly.</p> <p>Worried about the potential for expansion in future.</p> <p>Feel that unfair burden placed on medical professionals.</p>	Not Answered	Unable to answer many questions as they appear to suggest an assumed support for the proposal.
Agree	If someone is of sound mind, but terminally I’ll, with very Limited quality of life, they should be given the option.	Not Answered	It sounds to me that it has been thought through thoroughly and it all makes perfect sense.
Disagree	I feel allowing assisted dying could make members of some vulnerable groups (eg elderly/disabled- ie groups with significant numbers) feel under pressure to end their lives, for fear of becoming a burden to family/carers/society in general.	For over 5 years	

Disagree	I believe that at the passing of this bill devalues human life. All life has a value and at the point in which assisted suicide would be considered is the point where the individual who's life is in question is the point where those around the person would be robbed of the opportunity to care for the person. At it's heart this bill is completely unethical and uncontrollable, at what point do we say this is when you can have an assisted suicide - when you're terminally ill?? But what about those who are chronically ill?, this bill is unethical - who is speaking up for doctors conscience rights? Why is human Life becoming a commodity with human existence being bargained? With the leaps and bounds being made in palliative care I believe there is a way around this in that people will still be passing away in dignity, surrounded by those they love with their time with loved ones being maximised.	Not Answered		As mentioned earlier I can view this law being passed as become uncontrollable and it is actually totally unnecessary. We start with strict boundaries in place and then slowly it becomes uncontrollable and we get to the point where the Isle of Man is more well known for its suicide tourism than culturally rich heritage. I can't help but feel that it will be used as a way to boost economy - how selfish. Why are we considering devaluing human life and robbing loved ones of the privilege to care for and look after family members. I mentioned earlier in the consultation my reason for disagreeing, I truly believe all life at every point holds beauty and is a gift, who are we to make the decision to selfishly support those who want to cut their existence short as a means of bringing money in and boosting economy rather than provide care, support and love, maximise there time and increasing the chance of a mind being changed if a decision was made at a low point.
Agree	It's important for individuals to be able to have their point view heard when making an end of life decision. It's their life. This may impact others but ultimately any one should be able to end their own life within the right environment and not breaking any laws.	Not Answered		
Disagree	No one should take their own life	Not Answered	10 years	
Agree	Frankly, I see assisted dying as healthcare. It is not for the government to determine what constitutes necessary healthcare, especially when there's a pretty questionable logic behind such interference.	Not Answered		
Agree	I have Motor Neurone Disease, an incurable illness which is progressively debilitating. I have considered suicide on numerous occasions but I fear a do-it-yourself approach may not be successful and could leave me in a worse state. I also think that this would be more traumatic for my family	Not Answered		
Agree	I think people should be in charge of their own destiny/death.	For over 1 year		
Agree	I believe that no-one should have to end their life in pain or distress. The thought of having to endure the very personal care which may be needed being imposed on someone who would rather have an earlier death is inhumane.	Not Answered		
Agree	I have a terminal illness (pulmonary fibrosis) and as the later stages will slowly reduce my ability to breath they will be very distressing for me and loved ones. I may well not wish to use assisted dying but the possibility of doing so should matters become unbearable would have been a considerable comfort to me. I would ask that those making this decision consider how they would feel if they were in my position.	For over 5 years		No
Agree		Not Answered		
Agree	We can give our loved pets a dignity in death. Yet we force ourselves to suffer until the very end. Why can we as humans not choose to end our own life in dignity also.	Not Answered		The medication shouldn't be prescribed. But be provided in a secure environment. Whether this be a facility. Or a health care professional coming to the house.

Agree	It is the quality not quantity of life which matters in my opinion.	Not Answered		I feel that it does not go far enough. If I felt that my quality of life had deteriorated to a level where it was no longer enjoyable then I would want to die.
Agree	I value quality rather than quantity of life.	Not Answered		
Agree	People should have the right to choose to die	For over 1 year		
Agree	If I was in the position where I was facing the rest of my shortened life in agony, I would want the option to be on the table if a doctor and myself / my next of kin agreed it was suitable.	Not Answered		Dignitas seems to be the world leader, use that model as a starting point.
Agree	It is a human right to decide if I live or die	For over 5 years		
Agree	My Nan was terminally ill 8 years ago and watching her suffer and in pain was hard. I think people in these situations should be able to choose to prevent this.	Not Answered		
Agree	When a persons quality of life is seriously lacking and maybe severe pain then it is time to end the suffering,,, many old people and some not even old hang on for years causing upset for all family members , an opportunity for assisted dying is a must in a civilized society,,,,, Of course also it has to be remembered that suicide rates may reduce which a very sad end to anyones life. Suicide is just an illegal form of self inflicted(assisted) dying ,,,,,, IOM gov needs to allow the living to LIVE but also to DIE with dignity	Not Answered	Don't want the IOM to become the slaughter house for the uk. Non residents would have to be very carefully considered.	Healthcare professionals should not be present at the end unless specifically asked for. It is a very private time for the individual and/or family. An individual must not HAVE to sign or administer the drugs as they may not be capable however if capable it sounds a sensible procedure. Question 14 details box is not readable in full after typed. ! I say in response to question 14 We don't want the IOM to become the slaughter house of the uk. Only IOM residents should be allowed the facility. Of course this causes a potential problem with eg TT riders having serious accidents ,, they could become "stuck" in limbo on the IOM. This needs careful consideration.
Agree ..		Not Answered		
Disagree	Assisted dying will lead to abuse and increase of suicidal intent. The vulnerable in the society will no longer feel safe as they may be encouraged to die because they are burden. And nobody owns life	Not Answered		
Agree	I have Marginal Zone Non=Hodgkin's lymphoma, a type of cancer which is controllable but not curable. I was diagnosed in December 2008 and received radiotherapy and chemotherapy for 9 months in total. A further tumour in my face developed in 2019 and I had further radiotherapy in February and March 2020. I expect that I will become terminally ill with this disease in the future and I would like to be able to have assistance to die when that becomes necessary without having to travel abroad when I am very ill.	For over 1 year		
Disagree	I cannot believe that a doctor could give unbiased or impersonal advice. they are only human and should not have to carry the burden of killing someone.	Not Answered		when I told a doctor at Ramsey Surgery that my mother had recently died of dementia his only comment was 'didn't you think of taking her to Switzerland?' I was shocked and horrified .This surgery seems to treat life cheaply . I am actually nervous of attending the practice If I should ever have a serious illness.

Agree	<p>I am not sure that the bill goes far enough for people who have lost capacity and gave absolutely no quality of life. My sister and I had to watch our Mother and Aunt slowly die in nursing homes where they had no quality of life, Conversations that I had with both my Mother and Aunt prior to them becoming ill was they they would never want to end up in a home not being able to enjoy life.</p> <p>They were their for different reasons: My Aunt had a stroke and had a peg fitted. All this did was prolong an awful life. She was bedridden, double incontinence, non-communicative, and in the fetal position for a number of years although turned regularly to stop bedsores.</p> <p>My Mother had heart surgery and was in ICU for longer than expected. She was also diagnosed with vascular dementia. She also had cancer, thyroid issues. She ended up bedridden, non-communicative and basically slept most of the time,</p> <p>We had to watch both slowly die knowing this is something that they would never had wanted. Can the bill cover these scenarios too?</p>	Not Answered	<p>I have put "not sure" to a number of the questions above as both my Mother and Aunt would have been unable to give consent. I do think this should be put allowed in a living will with a view of the person(s) who have enduring power of attorney should also be consulted.</p>
Agree Not Sure	<p>I work with elderly people and have had the privilege of caring for many in their final days. Oftentimes people have confided to me their privately held feelings. Whilst some have wanted to die to end their pain, others were concerned about being a burden to their families and to caregivers.</p> <p>I think that some elderly people are just too vulnerable for this law to work as intended. Elderly people can be very guarded when talking to doctors, as I have found to my frustration on numerous occasions. I don't think that two doctors would reliably be able to establish the truth behind a person's stated wishes.</p> <p>If there were some mechanism to assist people who were truly suffering then I wouldn't be against it.</p> <p>If this would turn into a Dignitas style money earner I am absolutely against it.</p>	Not Answered For over 5 years	<p>Please speak to the staff in nursing homes and ask them if their residents are honest with doctors. Residents can sometimes be equally guarded with registered nurses so please ask the carers who know them best.</p>
Agree	<p>If the person who is terminally ill is in pain and not having a reasonable quality of life they should be allowed to make their own decision to end their life in the way they choose.</p>	For over 5 years	
Disagree	<p>As usual, this legislation, if passed, will soon be used for a widely expanded range of situations, going far beyond the claimed original intention. As it stands, it is already a threat to vulnerable people, and as time goes on, it will become a wider-ranging threat to the community. As the expression goes, if you trust government, you obviously failed history. I am against the legalisation of 'assisted dying'.</p>	Not Answered	<p>I note that most of the survey questions are worded in such a way as to assume the person completing the survey already supports the idea and the only issue is one of degree. I entirely reject the idea of legalising 'assisted dying'. The survey is fundamentally biased towards the draft Bill.</p>

Agree	One should have the right to die with dignity. Someone enduring an increasingly difficult and undignified illness should not have to resort to attempting to take their own life, usually unsuccessfully. Control over one's death is now possible and should be permitted.	Not Answered	Let the iom be a leader in pushing forward the relevant laws
Agree	I believe that it would be preferable for people who have a terminal illness and in their opinion very poor to no quality of life to able to choose how that is managed with the option of assisted dying being included.	For over 5 years	<p>The offer and provision of palliative care should be the priority.</p> <p>The ability to communicate effectively needs consideration.</p> <p>In regard to point 27 I think the “living will” should cover circumstances where the person has become unable to communicate to state in advance that they would want all intervention removed if that person is not going to have any length and/or quality of life in the future.</p>
Agree	Death is something we all face, forcing people to live through the pain of end of life is simply cruel. if there is an option for a painless death for something who's death is terminal who are we to deny them peace at the end of their existence.	Not Answered	The choice to decide whether to continue in agony and fear of terminal illness or pass away peacefully should be exactly that, a choice, not for governments or for public opinion to dictate. This is an issue which is constantly at odds with religious fundamentalism, we cannot allow more people to suffer because of superstitious ideology.
Agree	<p>The alleviation of pain and suffering should be one of the bedrocks of any civilised society but one which Governments have historically failed to act upon when it comes to the ultimate life or death decision making process. When deemed appropriate we rightly put down our pets as a matter of course without the ability to consult them yet for some unknown reason we deny ourselves the mechanism for this when we ourselves can request it.</p> <p>Like organ donation, individuals should be allowed to record their wish on the matter during good health so that people who object in principle can opt out and leave those in favour to get on with it should the circumstances arise.</p>	Not Answered	<p>1. I fully support the proposal.</p> <p>2. The facility should be open to non-residents as per the Swiss model.</p> <p>3. People should have the provision to opt out on principle as per organ donation.</p> <p>4. The procedure should ensure that Medical professionals administer the terminal medication without fear of reprisal.</p> <p>5. The choice is that of the individual concerned, with the agreement of Medical professionals, without the need for relatives to agree to whatever conclusion is reached.</p>
Agree	The pain and the knowledge it is over can be so daunting. Knowing that real support is not there, not being able to get help, not wanting to have help, not having a religion to help, being alone.. so many possible reasons. Often not knowing how long the pain and uselessness is going to continue.	Not Answered	
Agree	It is an individual's fundamental right to determine when and whether they request assistance to release themselves from unenduarble suffering or disablilty when there is no hope of cure.	For over 1 year	

Agree	It would be an improvement in quality of life to allow people to die with dignity I.e. on their own terms, as comfortable as possible and at a time convenient to them do they can be with their family.	Not Answered	An advanced directive should absolutely be allowed in case of serious brain injury or other severe disability. Considering people will openly joke about wanting be smothered or have life support machines turned off if they're ever in a vegetative state, and given that we generally trust adults to make their own health care decisions, the law should be updated to respect these views and allow assisted dying. The correct response to the concern that elderly people would be pressured to end their lives rather than burdening their families (financially or otherwise), is to overhaul the care system to something more viable for working people, rather than keeping people alive when they don't want to be. Assisted dying should be seen as a part of normal human bodily autonomy.
Agree	I believe that people should have a choice of whether to end their lives at this point rather than causing additional suffering to themselves and possibly their loved ones.	Not Answered	
Agree	People who are terminally ill or in lots of pain which cannot be alleviated should have the right, provided they have capacity to do so, to make their own decision on whether they end their own life.	For over 1 year	
Agree	After watching a beloved close relative die a very distressing death I would wish assisted dying choices for myself	Not Answered	I think it would be a positive step towards the autonomy of a person who is in the terminal illness stage allowing them control over their own death, a good death without distress and pain.
Agree	It is my absolute right to choose the manner of my own death should I be diagnosed with a terminal illness such as cancer. I do not wish to suffer a prolonged, painful death like my mother endured. The only alternative to assisted dying at present other than suicide is to refuse food and water. My mother was 89 and had terminal cancer. It took her 6 days to die. It was horrific to witness her suffering and inhumane for anyone to have to die this way. Provided the Bill ensures that the vulnerable are safeguarded it should be and I repeat that it should be everyone's absolute right to choose the manner of their death. Without such a choice I would be forced to go to a country such as Switzerland. Being fit to travel with a terminal illness would inevitably mean having to end my life sooner than I would wish to.	Not Answered	
Agree	In some situations there is no quality of life or enjoyment. Life is being preserved but not lived . Having seen close family die , there is a point where prolonging of life is cruel to the person dying and ending life comfortably would be kinder	Not Answered	Think assisted dying should be allowed on the island. Many terminal conditions and progressive conditions have prolonged and unpleasant end of life . Personally , I would not want to live with advanced dementia where I don't recognize family and the world doesn't make sense ..what a frightening world to live in . I also wouldn't want to go to the bitter end if I had MND or MSA. There's a point in these situations and others where there is more dignity in dying at a time that feels right for you.

Agree	I feel strongly that an individual should have the choice to determine their end of life preferences	For over 5 years	Yes, don't allow the objectors to water down or stop this important legislation from becoming law. Despite what they say I believe there are sufficient protections in place to avoid misuse or abuse
Agree	There is no need for end of life suffering in many cases, it is a horrible thing to contemplate as you get sicker.	Not Answered	I feel the final part of the process, of actually supplying and administering the drug should be overseen by a professional. The idea of picking the drugs up while in the pharmacy seems open to potential risk of criminal misuse/theft.
Disagree	There are too many pitfalls and too much potential pressure on people.	Not Answered	
Agree	My body my choice..... Plus ..after working for nearly 40years in nursing spread overgeneral, psychiatric and elderly mentally ill and witnessed the struggles ,pain and loss of dignity in the final weeks, days of people's lives .☹️.....I sadly came to the conclusion that we are kinder to animals than human beings by making the decision to end their lives ,suffering for themas they can not	Not Answered	
Agree	For myself I would hate to be a burden on my family if I was terminally ill. Having nursed my brother with a terminal illness it was heart breaking - he wanted to die but suffered such pain before he left us.	Not Answered	
Agree	Subject to it causing no harm or danger to others, I should be the absolute authority over what happens in my life, including how it should end. It is much more preferable that in such a scenario as outlined (e.g. terminal diagnosis, expected death within 6 months, etc), I should be able to control the circumstances of my death in accordance with my own preferences and retain my dignity.	Not Answered	
Agree	I nursed my late husband through lung cancer and saw his pain and distress. I do not consider that anyone should have to go through that.	Not Answered	
Agree	To not enforce suffering of a person	For over 1 year	
Agree	If like us you had witnessed first hand the distress of loved ones who had to endure the trauma of end of life care it is something you would not wish for yourselves and nor do we! End of life care in our experience was not peaceful and there was clearly suffering involved or so it seemed to us. It is what we worry about most as we are both in our 70's think about how our lives will come to an end and earnestly hope that assisted dying properly and carefully controlled will be an option you us. Those trying to bring their influence to bear to oppose assisted dying can only in our view either be of an age where the reality of terminal illness has yet to be given the most serious of consideration and/or they have been extremely fortunate not to have seen for themselves loved ones entering end of life care and enduring the process of dying and and the distress involved and which often can't be entirely relieved.	For over 1 year	A strict requirement that on all occasions the process of assisted dying must be supervised and administered by a health care professional by the kindest and most effective means possible. We would not see the administration of tablets as meeting this criteria. A simple and painless injection should be means as it is in veterinary medicine.

Disagree	<p>Because it is murder. I am strongly opposed to any form of assisted suicide or assisted dying Bill introduction in to the Isle Of Man laws.</p> <p>Since the legalisation of Euthanasia and assisted suicide have been introduced into Canada, Belgium, Netherlands and other jurisdictions the safeguards to protect the vulnerable against exploitation, abuse and murder are now in the processes of being removed or have already been removed, this alone should sound a warning to people.</p> <p>There is a reason people have warned against legalising euthanasia time and time again. The incentives for individuals and the state to behave in diabolical ways are simply too strong to be ignored. Once the essential moral safeguard that murder is wrong is abandoned, the creeping normalisation of death by doctor inevitably expands.</p>	Not Answered	
Disagree	<p>If assisted suicide is allowed, it would put vulnerable people at risk. Those who feel that their life is not worth living or feel like a burden would be encouraged to end their lives. In countries where assisted suicide/euthanasia are legal, it is often extended to more vulnerable groups. For example, in Canada it has been extended from the terminally ill to the chronically ill and then to the disabled and mentally ill. I have MS and am deeply troubled by the message that this law would send about the value of the lives of disabled or sick people. Terminally ill people require good palliative care and support - they don't deserve to be encouraged to end their lives. People who are suffering from mental illness need the correct support to show them that their lives are worth living. For many people, they may feel suicidal during a time of depression or when facing life pressures. With time and support, this can pass and they can begin to enjoy their lives again. Furthermore, doctors take an oath to do no harm. Legalising assisted suicide would damage the doctor-patient relationship by eroding all trust. It would traumatise the healthcare professionals involved and would put people off entering the healthcare profession. Assisted suicide does not guarantee a painless death. In fact, there are no guarantees that dying by assisted suicide is peaceful and painless. Experts writing in the British Medical Journal argued that the adverse effects of the lethal drugs used in assisted suicide "include vomiting, myoclonus and a prolonged dying process of up to 47 hours. Dr Joel Zivot, an associate professor of anaesthesiology and surgery, said:"I am quite certain that assisted suicide is not painless or peaceful or dignified. In fact, in the majority of cases, it is a very painful death." I qualified as a vet so I know how distressing vets can find it when euthanasias do not go well. Ordinarily, there will be some myoclonus (muscle spasms), agonal gasping</p>	Not Answered	<p>Vulnerable people or those facing financial pressures or feeling like a burden would be encouraged to end their lives. They could be coerced or abused into ending their lives. It would destroy the doctor-patient relationship and traumatise our health professionals. It would undermine the provision of good palliative care. It could easily be extended to further vulnerable groups (the chronically ill, mentally ill, disabled, children, dementia patients). It sends a message that certain people's lives are not worth living. It would likely lead to an increase in overall suicide rates (this has been seen in other countries as suicide becomes more acceptable). Suicidal people would be encouraged to end their lives instead of receiving the help and support they need. Releasing unregulated doses of lethal drugs into the community is very dangerous - vets do not do this for good reason. In fact, one of the reasons the suicide rate in the veterinary profession is the highest of any profession is that we have access to these drugs. Please do not give more people, especially the vulnerable, access to them. I am shocked by the stories from countries where assisted suicide/euthanasia are legal. For example, the story of a Dutch woman with dementia whose family restrained her to allow a doctor to euthanise her in line with an advance directive. When the doctor and the family sought to conduct the euthanasia procedure, the patient resisted and said no three times. The doctor put a sedative in the patient's coffee and she was held down by her son-in-law whilst the doctor administered the lethal drugs to end her life. At a subsequent trial, the doctor was acquitted and later the Supreme Court of the Netherlands confirmed that doctors acting in this way is compatible with the Dutch euthanasia</p>
Agree	<p>If an animal is terminally ill and suffering, we take them to the vet for euthanasia to end their suffering. Why should a human being be made to live an extra few weeks or months, in pain and losing themselves if they want to end their life on their own terms? As long as a person has the mental capacity to make that decision, they should be able to do so.</p>	For over 1 year	

Agree	If person concerned requests end of life assistance a consultation with a person unrelated to or have care for .should have an unemotional discussion.	For over 1 year	
Agree	<p>If a person is suffering from a condition which is untreatable and which causes them extreme distress it is inhumane to completely deny their wish to end their life with dignity. In my opinion it is almost equivalent to deliberate torture to insist that they have no right to an assisted death.</p> <p>A well planned framework for assisted dying would ensure that the individual and their chosen friends and family would be able to discuss and be involved in the possible decisions and choices required.</p>	Not Answered	<p>The views expressed by Manx Duty of Care suggest that they are very worried that vulnerable people would be in danger if the Assisted Dying Bill became law. I think it vital that their concerns be addressed so that it is clear that vulnerable persons are fully protected from any possible misuse of the proposed legislation.</p> <p>How this would be achieved and provenly demonstrated must be included in the legislation. There must be provision for the appointment of an independant advocate (not necessarily a legal professional) to ensure that a vulnerable person has not been persuaded against their will to undertake the assisted dying process.</p> <p>It is also of fundamental importance that any such safeguards cannot be used as a deliberate means of permanently frustrating the desire for a person to carry out an assisted death. The bureaucratic procedures involved must be clear, simple and efficient. Otherwise these safeguards would have the effect of prolonging the daily torture being experienced by the person who has clearly expressed their firm decision to have an assisted death.</p>
Agree	To allow adults autonomy and control over when to end their lives so that significant pain and suffering can be ended.	For over 5 years	
Agree	Both of my parents have had cancer, and I have lost Uncles and Grandparents to the disease. You should be able to choose to end your life, rather than facing the horrible, undignified ending that any terminal illness can cause you, and your loved ones.	For over 5 years	
Agree	I have no wish to have a long painful death . Eg debilitating stroke, terminal cancer, dementia	Not Answered	
Agree	<p>Making any person who is suffering chronic pain for which there is no medical intervention or a life limiting, either in quality or time, condition continue to live is in my opinion inhumane. I would question those who argue that a future medical solution may be discovered that will alleviate/cure a certain condition. This is of course a possibility however in the here and now why would you want someone to suffer in the hope of future treatment.</p> <p>Question 9 does not allow me to respond as I would wish, I would question why this is the case as it seems, to me, to be pro-life slanted, not that I am pro-deathI would. I would say there should be no time limit.</p>	Not Answered	<p>I believe the Swiss arrangement is preferable.</p> <p>Q16, if a doctor conscientiously objects to assisted dying they should not be able to establish a patient’s capacity Q15</p> <p>Q17, not a psychiatrist who conscientiously objects</p> <p>Q19, what if they are unable to sign or otherwise indicate their wishes, courts are able to make this decision</p> <p>Q22-24, I do not think a person should take the medication home, this would be open to accident/abuse</p> <p>Q25, define health care professional, yes to a professional, such as hospice representative</p> <p>Q26, just numbers no other details</p>
Agree	In principal I agree that assisted dying should be permitted for terminally ill adults on the Isle of Man because I believe that if a person is suffering and/or has no quality of life that they should have the option to end it with medical assistance if they want.	For over 5 years	

Disagree	<p>What is terminally ill?</p> <p>Who carries out any procedure?</p> <p>Very bad effect on medical doctors, undermining their very ethos.</p> <p>I have not put 'not sure' for almost all other responses as I do not agree that the bill should be enacted. I am anxious that these responses should not be taken as agreement to the bill. I believe the questionnaire is fundamentally biased in favour of the bill, because of the is element in the response structure. The 'not sure', as completed, implies some kind of agreement to the premise of the question viz that I agree with assisted dying.</p>	Not Answered	<p>I disagree with the original proposition and therefore have out 'not sure' and now 'other'. This completion of options should not be used in any discussion of assisted dying as I do not agree with it.g</p>	<p>No, except that I disagree with the main premise of the bill.</p>
Agree	<p>I would wish to remain in control of my life and if the quality of life become very poor, then I would wish to end it on my own terms. It should not be for the Church or others to decide when and how my life should end, possibly in a lot of pain and with a poor quality of life..</p>	For over 5 years		<p>The Bill should not be delayed/postponed/cancelled by certain individuals expressing a view that may apply to their particular beliefs, but would not apply to my wishes concerning treatment of my body.</p> <p>My body belongs to me, not the Church or the State and , with the law having appropriate safeguards learned from the experience of other countries that already practice assisted dying, the Bill should allow individual choice in this matter.</p> <p>My wife and I already belong to Dignitas and financially support their work. If this Bill is not passed in the Isle of Man but personal circumstances make it desirable for either of us to need assisted dying help in the future, we would travel to Switzerland to get this done.</p> <p>We would obviously wish to stay in our own country and at home for as long as possible however but this time may be shortened if we have to travel to another country in order to get help with assisted dying should this be necessary at some future time. My wife and I are both in good health at the present time.</p>
Agree	<p>The Individual should be allowed freedom of choice.</p>	For over 5 years		

Agree	<p>When you love someone it is very hard to see them suffering. Especially if you know they are extremely unwell and have no hope for recovery. If they then told me they wanted to die, then I would know that they are suffering far more than I can comprehend.</p> <p>Under current circumstances this person would be made to live out the rest of their lives in pain, unable to have any sort of quality of life, and would just be waiting to pass away.</p> <p>I believe that people should be allowed to choose for themselves a dignified death.</p> <p>Personally, if I, myself, were diagnosed with a terminal illness that caused me unbearable pain and left me bedridden for the rest of my life then I would consider assisted suicide.</p> <p>I would prefer this to becoming completely reliant on a family member. I would believe that I do not have any quality of life, and would be a burden on my family and society.</p> <p>Assisted suicide would allow me to choose when I can die, and I can organise to have all my loved ones around me, rather than have the chance of dying all one in a bed because they couldn't make it to me on time.</p> <p>I believe that it is unfair to make a person suffer (potentially for years) until death when they should be able to have the option to have a pain free death sooner, if they so wish.</p>	Not Answered		
Agree	<p>The issue of those with terminal illnesses experiencing great suffering toward the end of their life has been quite the significant ethical debate in recent times, and in my opinion for good reason. Why should someone be forced to continue an existence with an extremely poor quality of life, and often wrought with pain, just for their lives to come for an end in the near future anyway? If somebody who has a short life expectancy and is of sound mind decides that they would like to end their suffering now, but cannot do it of their own means, it seems more ethical to help them toward that goal within a controlled medical environment, and one with the proper regulations set up.</p> <p>Currently, the only options terminally ill people have is to either continue with their care to prolong their life, refuse medical care other than pain relief to bring about the natural end of their life, or refuse food, water and medical care in an attempt to speed up the process. The latter of which seems a rather barbaric option to have to take just so they can end their own suffering sooner and on their own terms.</p> <p>Now, I'm not suggesting assisted suicide should be freely offered to anyone without a single thought otherwise. The decision should be made by the person themselves, and only them, and there should be regulations in place to help protect these people in a vulnerable position of their lives so that they're not coerced by family members or even medical staff into making the decision. Psychiatric evaluation should also be carried out to ensure that the patient is certain of their decision, and not having their judgment clouded by treatable mental health issues that could be magnifying their suffering.</p>	Other	For over 2 years	

Disagree	Although I do have sympathy for those who find themselves in such a place that they would choose assisted dying, I think it is immoral. This is for a number of reasons including the burden that is placed upon doctors by getting them to take responsibility for a persons death. I also disagree because I feel the law change has the potential to be something f a slipper slop, as has been seen in Canada. Finally, my own experience with grandparents who have said "I don't want to be a burden on the family" on their low days, which would probably be sufficient for assisted dying to take place under new legislation. These are just a few of my reasons for objecting to assisted dying being made available on the IoM.	Not Answered		
Agree	I believe that people should be given a choice to end their lives with dignity and in a safe and painless manner if they are suffering.	Not Answered		
Disagree	I wholeheartedly agree with the theory. I DO NOT trust this Government to be able to apply the practice to the full extent of the regard it needs.	Other	N/A	You are not fit to be responsible for implementing something so important!
Disagree	Medical pain relief and spiritual comfort should be offered to the dying but the end which comes to all of us must come when it is time. And please note the following question no. 9 is open ended. In answer . I am definitely sure that there should be no limit on natural life expectancy . Turning off a life support machine is another matter however . It is then that medical intervention has the unexpected consequence of requiring a reasonable time period and euthanasia by the medical practitioners who put the life support in place . The burden of turning off such a machine should be carried by medical practitioners (working within reasonable time lines) Iso saving families from having to make a very cruel choice from which they will never recover . Death is one thing but asking a parent to agree to termination is unthinkable .	For over 5 years		There should be no assisted dying .
Agree		Other	Over 15 years	I think the process should be as simple and streamlined as possible. When someone has had enough, for whatever reason, the means to end their life should be convenient and straightforward. It should not be swamped in red tape and delayed or denied because of other peoples' opinions, no matter how well meaning. It should be every individual's right to choose the time and the place.
Agree	It is important for individuals to maintain dignity, choice and autonomy at all times of life, including when disease and illness seeks to remove these from us. It can be difficult for family members to make decisions regarding the end of the lives of loved ones based on conversations with doctors alone. Assisted dying offers an open and frank discussion within families which may help when the time comes. I would not wish to be a burden, physically or emotionally on my family.	Not Answered		I believe it should be undertaken with medical supervision incase anything unexpected occurs during the process. I also believe that the individual must be capable of administering the necessary drugs themselves.

Disagree	The dying need medical and spiritual comfort but everyone has to face death and when it comes it comes .	Not Answered	
	I am totally against euthanasia .	Not Answered	
Agree		Not Answered	
Agree	you wouldnt let an animal suffer , humans shouldnt be left to suffer.	Not Answered	
Agree	Some people suffer badly at the end of their lives, I have my own individual beliefs and would wish to make my own decision as to when my life should end if I were in that position and the availability of assisted dying would alleviate unnecessary suffering.	For over 5 years	
Agree	We treat our pets better than our relatives. Life is about quality not quantity. Q9 - some illnesses may be difficult to determine life expectancy. Also something like dementia - when does life still have meaning for the individual? when is their quality of life so diminished that they would consider it worthless? Alzheimer’s/ dementia is in my family and because of that experience I have every intention of signing a living will for myself. My aunt diagnosed with early onset aged 40, lived for the last 20 years of her life not knowing her family, unable to speak or communicate with others and unable to care for herself in any way at all. My mother also has Alzheimer’s and though she is very elderly (96) the progress of the disease is not what she would have wanted for herself. I too do not wish to be in the position that either of these ladies found themselves, hence the living will, in the hopes that I can prevent.	Not Answered	Q22 - not sure - I would not want the pharmacy to be a target for criminals wishing to misuse the drugs on or off island. perhaps rotated around several pharmacies?
Agree		Not Answered	
Disagree	I personally think that assisted dying is an awful idea to make legal. Reasons being people may already be suicidal and trying everything to get their head cleared of the idea of taking their own life and talking to people to try help them get through this depressing state of mind and here you are taking them back to square one of the thoughts of taking their own life. This is not only taking them back to the idea of taking their own life but also if it is legalised, they will be able to go forth with their idea of 'an easy way out' of the stress, grief and depression they may be experiencing despite all of their efforts trying to get out of that mindset.	Not Answered Not Answered	Overall, I think it shouldn't have even been considered that the Isle of Man government are considering making assisted dying legal.
Disagree		Not Answered	
Agree	Not just for terminally ill, the option should be offered to all elderly people who don’t want to carry on a be a burden to their families or the state.	For over 5 years	Keep the whole procedure from beginning ti end as simple as possible. The more barriers put up defeats the whole point. It should be seamless.
Disagree	We will all face death at some time in our lives, it is a part of living! I see no justification in allowing legal suicide as there are many ways available to ensure that those people who are terminally ill, can spend their last days pain free and in comfort. I am also very aware of the psychological pressure people may be under to end their lives for the benefit of friends and family rather than the individuals needs.	For over 5 years	Whilst I disagree with assisted suicide the survey questions ask for my opinion should the proposal be introduced I have therefore submitted my answers on that basis; my answers are therefore not to be taken as a response from a supporter of this issue.

Disagree	1. Make suicide ordinary practice by law 2. Make depressed an vulnerable people victim of pressures and killing 3. Doctors are not executioners 4. Diagnoses are always just opinions	Other	These questions are just a trick to make me agree with an abomination by law.	These questions are unfair, politically oriented and a trick to make people agree with an abomination by law.
Agree	I've watched 2 family members die from cancer, my mum probably suffered the worst, she was at home with palliative care nurses coming in to help and as if cancer was not enough she developed shingles when the nurses removed the driver we physically had to hold her down and I remember thinking you wouldn't let a dog die like this it was absolutely disgusting the way she suffered at the end. I've watched many more family and friends that have also suffered at the end NO NEED 😞	Not Answered		
Agree	I think it is cruel and inhumane to allow a person to suffer unnecessarily	Not Answered		Provision for those unable to sign
Agree	I firmly believe that when you stop living and start waiting to die it is cruel and unjust. We would not keep animals going as we do humans, it is cruel and unfair. I believe in life, but not in allowing people to eek out in pain or without their faculties waiting to die.	Not Answered		I believe if you have lost your faculties or are in awful pain or not in control of your body and choose to not be here any more you should be able to make that decision. Have it like a donor card where people sign on to allow someone to make the decision if the person is unable to or allow family to say if that is the persons wishes. I believe the Isle of Man is a fantastic place for this right to life and death to be a forerunner.
Agree	Everyone deserves the right to die with dignity.	Other		
Agree		Other	Unsure	
Agree	Freedom of choice.	Not Answered		
Agree	I'm answering a consultation.....my reasoning would take long communication to answer fully. I know how I feel and if you need to contact me for further explanation, please do.	Not Answered		No
Agree	I had a parent go through 18 months of stage IV cancer treatment with no hope of remission. Almost the whole of their last month of life was spent in hospice receiving palliative care and they themselves were sat there waiting and wishing to die but having to wait for their body to finally give up. As a family we had time to spend with them but they admitted to us they were more than ready to go and it was very traumatic to have to watch them despairing that they were waiting around to die. They lost all joy in their daily lives and even eating and drinking was a task for them. They didn't lose consciousness or experience any loss of mental capacity until the day before they died and when they did I can honestly say although we were so sad to lose them we were relieved they were no longer in pain.	For over 5 years		
Agree	I am not afraid of dying, I am scared about the process of dying	Not Answered		
Agree	As a basic human right you should be able to make a coice about your continued life. That should include when it should stop in a dignified way.	Not Answered		The island has a unique opportunity to take lead rather than follow. Legislation such as this is a clear step in the right direction in terms of granting people autonomy over their own lives. It should be supported.

Agree	As long as they are mentally capable to make the decision a person should have the right to choose to end their life peacefully and not in agony. Why would you intentionally put a human being through intense pain & suffering for their last days? Preserving a life just because we can or have the technology to do it, does not make it the right thing to do.	For over 5 years	I would be concerned if the medication was kept in the patient's home for fear of it being used by the wrong person, administered unlawfully by someone when a patient wasn't ready, being administered incorrectly or a patient using it on a 'bad day' rather than when they are truly ready.
Disagree	<p>There is , within living memory, in Germany a system which was introduced into a civilized society which escalated to widespread state organised murder as that society descended into tyranny.</p> <p>This was introduced as euthanasia.</p> <p>It could be argued that that comparison to what is proposed is spurious because the former was spurred by the perverted science of eugenics and ideas of racial purity whereas this is benign as it is borne of compassion.</p> <p>We should remember though that the AktionT4 killings were done systematically with little emotion it became routine- simply- the “banality of evil”.</p> <p>We are confident that this could never happen here, of course.</p>	For over 5 years	<p>1.A careful analysis of what happened in Canada since MAID - (medically assisted dying) was introduced should be mandatory reading for MHKs who likely to vote on this.</p> <p>2.The Hospice Movement over the last twenty five years or has both answered many of these concerns and made this debate anachronistic.</p> <p>3.In former times, when a patient’s doctor was likely to have a closer and compassionate relationship during terminal illness, increasingly larger and frequent doses of opioids and sedating medication was administered to the extent that the dose limit was set by solely by symptom relief rather than adherence to the “usual” dose.This was not something that was broadcast, or needed to be. The doses were duly recorded in the practitioner’s DDA (dangerous drugs act) book which was available should the need arise for the case to be reviewed, for example by a coroner.</p> <p>but I know of one doctor whose DDA book was not examined by anyone throughout his whole time in practice.</p>
Agree	I do not wish to die in unbearable pain knowing that nothing will cure my illness. There would be no point in continuing with life.	For over 5 years	
Agree	<p>My Mother had Parkinson's Disease and had a long slow death over 10 years, where she effectively became a vegetable, unable to swallow food, communicate or move on her own. It was extremely distressing for her and our family</p> <p>My Auntie had dementia and had no quality of life for 9 years</p> <p>My cousin had terminal cancer which was painful and she begged to end her own life</p> <p>The above people all suffered a long, drawn out death and would have wished to end their own lives if they could. We are a nation of animal lovers but we would not let our pets suffer in the same way.</p>	Not Answered	<p>I am concerned that the draft Bill is not considering properly those with Dementia, They may go on to live a long time with absolutely no quality of life, which is why I ticked the box in previous section to support no time limit on illness.</p> <p>Also, if they have dementia then how can they be assessed by a doctor or psychiatrist? If their Will (written and signed pre-dementia) states that in the event of suffering from dementia in the future, then they they opt for Assisted Dying , this should be recognised and acted upon.</p>
Agree	I lost a very close friend to cancer and for his last couple of months he had no quality of life at all, and lost all dignity. He had a terminal diagnosis and wanted to go to Switzerland to end his life but then suffered a stroke and knew he could not ask anyone to go with him due to the potential prosecution they would face. Having watched him waste away I would never wish anyone to go through that. We do not let our pets suffer like we let friends and family - people should be able to make their own choice.	Not Answered	

Not Sure	<p>I believe that some people would consider themselves a burden to their family and perhaps feel that they should commit suicide.</p> <p>Vulnerable people could sadly be coerced into ending their life when they may not actually want to.</p> <p>No health professional should be able to say conclusively how long a person has got left to live.</p> <p>Often people who are diagnosed with a terminal illness feel depressed and they may decide to end their life when they are in this state of mind. They should be given help for depression and offered alternatives to ending their life.</p> <p>The medical professionals who administer the life-ending drugs could suffer mentally at any time due to the emotional stresses of 'playing God'.</p>	Other	<p>This question assumes that the person completing this survey agrees with assisted dying.</p>	<p>This consultation is biased as the questions are directed to those who agree with assisted dying and many people do not agree.</p>
Disagree	<p>I am a long serving retired GP from Lancashire now living in the IOM and I write to express my horror at the proposed Assisted dying proposal. There are many reasons why this should be rejected but the main one is that it is prone to abuse and I can foresee many deaths where the subject is pressurised into agreeing to go down this route to appease other members of their family or carers.</p> <p>I object to this proposal in the strongest terms,</p> <p>Dr Stephen Edwards</p>	Not Answered		<p>Many of these questions, to which I have not replied are loaded assuming that i am in favour of assisted dying, which I am not.</p>
Agree		Not Answered		
Disagree	<p>I think assisted dying, or more accurately 'State assisted suicide' should NOT be permitted in the Isle of Man. To propose that doctors in the Isle of Man have the legal right to forgo the very first tenet of the Hippocratic Oath to "do no harm" is perverse.</p> <p>The system would be open to abuse and put intolerable pressure of those affected when they are most in need medical and psychological support.</p> <p>We cannot surely in all conscience countenance treating human beings like sick animals and simply euthanize them. Is that what we want the Isle of Man to be known for?</p> <p>It would turn the Isle of Man into an international destination for euthanasia.</p> <p>If I were a doctor I would never agree to have anything to do with it.</p> <p>“Whatever has a Beginning has an End”. That is the natural order of things.</p> <p>Let doctors do the job they sign up for when they choose their profession; to cure the sick and alleviate the suffering of their patients. Not help kill them.</p>	Other	<p>I do not agree with assisted dying.</p>	<p>This Bill is not a good idea.</p>

Disagree	<p>I disagree entirely with the idea that assisted suicide because it goes totally against God's commandment "You shall not murder". I do not believe that anyone should be permitted, assisted or in any way encouraged to end their life.</p> <p>I oppose this proposed bill and I hope that the Island's representatives will have more respect for God's law in this matter than they did in the Abortion law.</p> <p>This questionnaire is very biased and badly put together. The questions following this one are irrelevant as fat as I am concerned because as I have said already, I totally oppose this bill.</p>	Not Answered	
Disagree	<p>As far as I am aware , in every country where the law has been changed to allow assisted suicide, even in the most limited manner, over time the safeguards put in place at the beginning have been weakened, allowing an ever widening of the availability of assisted suicide. You have only to look at the history of assisted suicide in the Netherlands, Belgium and Canada to know this. Why should we think The Isle Of Man will be different? I believe this assisted suicide bill proposal is (or will become) unfair to people who are vulnerable , with a development of a culture of pressure to feeling a burden to carers/family. I think it is also unnecessary and we should increase our investment of resources towards support for the terminally ill via palliative care.</p>	Other	<p>I don't agree that assisted suicide should be available to anyone on the Isle Of Man.</p> <p>As a first line of defence towards helping or encouraging a person to die a natural death, there should be a requirement for patients to experience/explore first hand the palliative care options and doctors should be required to proactively encourage patients towards this path.</p>
Disagree	<p>I disagree entirely with the idea that anyone should be encouraged, assisted or permitted to end their life for whatever reason. This proposal goes entirely against God's explicit commandment "You shall not kill",</p> <p>This questionnaire is biased and badly put together. I will not answer any further questions because of my complete opposition to the proposed bill.</p>	Not Answered	
Disagree	<p>Legalises the killing of other human</p> <p>Fundamentally changes the relationship between doctor and patient to no harm</p> <p>Vulnerable people will be under implicit pressure to end their lives</p> <p>Creates an expectation that people should end their lives if considered terminally ill</p> <p>People can often outlive doctors expectations- occasionally a number of years with good health</p> <p>There are already enough demands on the health service without adding this pathway</p> <p>Potential of end of life tourism or unintended provision outside the Isle of Man population</p> <p>The inevitable expansion to the bills initial aims to cover more vulnerable groups (even this consultation expands on the initial scope)</p>	Other	<p>I disagree with the bill.</p> <p>Questions 12 and 13 are leading and only allow softer options. There should be a disagree option.</p> <p>The questionnaire is poorly constructed and does not allow the full range of views for each question The choices are binary and no method to clear your answer.</p> <p>There should be longer option than 14days for question 20</p> <p>2 doctors signatures would not provide sufficient protection</p> <p>The question about being able to take the medication is shocking as this would others to take the medication to end their lives.</p> <p>The consequences of the bill have not been considered and this is surprising. There is nothing about the impact on doctors and those who can not support based on their conscience.</p>
Disagree	<p>Sovereignty of God to take life in His timing</p>	Not Answered	None

Agree	The option should be available for those who wish it and would otherwise linger in conditions they struggle to tolerate.	Other	3 years	<p>It should be a straightforward process, even if this causes difficulties for some. It should not be possible to obtain the medication in case you need it at some point in the future.</p> <p>There may be merit in allowing for the involvement of someone who is not medical, rather than just two doctors. Someone skilled in counselling to consider any underlying motivations and fears to discuss the decision, if required. It may be difficult to do this with family or friends.</p> <p>This is not a decision that anyone will make lightly. As long as the right safe guards are in place then anyone with mental capacity should be able to choose to die with dignity.</p>
Agree	As a human being I would like the choice to end my life if I had a terminal illness or degenerative disease that would make my quality of life unbearable or suffering immense pain on a continuous basis. We do not let animals suffer I think it is inhumane and cruel	Not Answered		
Disagree	I don't agree with assisted dying	Not Answered		<p>Continuous care and if necessary increased pain relief medication over assisted dying.</p>
Agree	People should have their own say in whether or not they continue to live in pain.	For over 1 year		
	My Grandmother had cancer for years. I was with her when she took her last breath. I am not sure, if assisted dying was permitted that she would use it, but her pain was unbearable - she ended up dying because she could no longer find the strength to breathe and she was like that for the last couple of weeks.			
	If I was ever in that condition, I would like the option to not face those last two weeks - to save myself the pain and the pain of the family around me too.			
Disagree	1. People's views change. In the past I have tried to commit suicide several times when depressed. Now that I am not depressed, thanks to both medication and lots of psychotherapy, I am very glad to be alive and productive helping other people.	For over 5 years		<p>Any option which makes it more difficult to obtain assisted dying should be included in the bill, and any option which makes it easier should be removed. What I would like is for the bill to be completely defeated and never reintroduced. No doctor should ever be required to play any part whatsoever in providing assisted dying or referring somebody for it.</p>
	2. Some families would like to get rid of their elderly relatives, who in turn feel a burden on their younger relatives. As a result, no matter how many safeguards may be put in place, they are risk of being tacitly coerced into killing themselves if methods for doing that are made easily available.			
Agree	It will allow those who are already dying a more dignified end and give certain comfort to their loved ones there was no pain and maintained their dignity in their final moments.	For over 5 years		<p>Like any other medical treatment, it needs to be stressed as an option not something that the patient should do. All medical treatment is optional and this needs to be made clear when suggesting it alongside other options.</p>
Agree	Individuals in this situation should be able to choose how they die. The State should provide appropriate checks/balances to assist this choice.	Other	3 years	<p>Ideally the medication should be taken in a medical environment, eg hospital. Where this is not practical, it should be allowed to be taken in the patients home environment, with a medical professional present. I dont think these drugs should be "out of sight".</p>
Disagree	The current state of Manx Care can not support this innitiative	Not Answered		

Disagree	I believe that allowing euthanasia for terminal patients will change the way society views disabled and terminally ill people. Many people who cared for feel like a burden and palliative or round the clock care is expensive. We are in the midst of a financial crisis and over half the people who worried about their bills, in the Uk, have considered suicide. It will be cheaper to give someone a life-ending injection than it would be to care for them properly and I think that is a worrying fact. Life is sacred and I believe that attaching any financial value to it sets a dangerous precedent. Ableism and elder abuse are horrendous facts of life and I do not believe that extremely vulnerable people can be protected with legislation. There are families who would rather someone die and they inherit than to pay for expensive care during an economic crisis. The government and state's job is to care for its citizens through sickness and health and I would be terrified to live in a UK where there is a caveat of 'as long as you don't cost us too much money'.	Not Answered	I am concerned about how patients with dementia will treated. A directive in the will led to a Dutch women being held down by her son-in-law and euthanised by a dr despite her clearly saying 'No' three times. The doctor was acquitted by the Supreme Court as he didn't have to 'verify the current desire to die'. That should be seen as a possible glimpse into a Uk with a law on euthanasia. I worry about Drs and pharmacists being put under pressure to participate in a procedure that they are vehemently opposed to. In Oregon, Drs have been told that if they don't agree with doing it perhaps they should leave the profession. The first line of the Hippocratic oath is do no harm, how can we ask Drs to participate in life-ending 'services' and also expect them to preserve life to others with the same prognosis. Care is expensive but it is also a sign of our humanity. The Third Reich 'euthanised' disable, mentally disturbed and infirm, I do not want to live in a country that shares any views on people's value with the Third Reich.
Agree	It would allow dignity of choice and reassurance to people facing difficult life ending illness.	For over 1 year	I would like to see the possibility of a living will to include assisted dying in the event of a diagnosis of dementia.
Agree	It's cruel to see someone physically and sometimes mentally dying in so much pain - and pro longing the inevitable	Not Answered	Sooner the better -
Disagree	Because I believe it is not the right thing to kill another human. It is exactly that. Killing. Who makes the decision whether somebody's life is worth living or not. In other countries where this has been made legal we have seen rules go out of the window and it is a slippery slope. Where do we draw the line? Terminally ill, mental health, suicide, eating disorders, old age and other illnesses. Who decides when that person can't express their will? In bringing in Assisted dying it means that our palliative care but be on the decline. I know Allinson will disagree but I know it will happen. People will feel they 'owe' others and society to die and it is just wrong.	Not Answered	I am learning about assisted dying in my RE course. I have therefore considered both sides of this argument and has decided that it is ultimately murder. I truly am worried for all the people who will undoubtedly feel that this is the only option for them. I think it is inevitable. I really hope that you can see that this bill goes against all our morals as Manx people. Wherever you throw us we will stand unless you want to die- we'll let you do that... Please I can only beg that you will reevaluate and I think of all the vulnerable people who this will affect maybe in the future my own family too. I don't know what else I can say apart from PLEASE. Finally once the law is out it is near impossible to go back and reverse the damage. It is the young people of the Isle of Man who will in 20/30 years time have to deal with the consequences of your decisions.

Agree	<p>It is unfair and absurd to allow others to control how long people should live with their illnesses. Everybody should have the right to live or die with dignity and those affected with terminal illnesses should be able to make the right choice for themselves. If assisted dying is a suitable option for somebody who would otherwise die in pain, it should not be taken away from them because it makes others uncomfortable or goes against personal beliefs.</p>	Not Answered	<p>Doctors should be allowed to opt out of being part of the assisted dying process, however those who are part of the process should be routinely checked that they're providing the best possible information and care and leaving any personal opinions, beliefs, and bias at the door as to not pressure the patient into their belief.</p> <p>A medical professional should be present during the administration but the option to take the medication should be solely down to the patient - however I believe there should be a designated space, much like dignitas, where it is a calm, peaceful place to allow people to say goodbye.</p> <p>There should not be a limit on how long their life expectancy is, and should be solely down to the person with the illness on when they are ready, which should be respected and not forced to wait until their situation worsens.</p> <p>Residency should not be compulsory and should be open to anybody who requires it. The same process should be taken, however, if people elsewhere in the world cannot legally die via assistance, they should be welcomed and taken care of here.</p> <p>People younger than 18 should be eligible, but should have a more rigorous process as to make sure they understand what they are asking and if they are unlikely to achieve a good quality of life with their illness</p>
Disagree	<p>I do not believe that any amount of pain can remove the value from someone's life.</p> <p>I oppose opening the possibility that a life 'should' end early for any reason.</p> <p>I deeply worry about the expansion of assisted dying to more and more people, particularly to people with mental health difficulties.</p> <p>I do not believe healthcare or the government should be involved in hastening the death of anyone under its care.</p>	Not Answered	
Agree	<p>In simple terms, this is about dignity in death. Whilst we must celebrate life and seek to live as long as possible, equally, there must be a maturity to those who are suffering. There are many people whose quality of life is irreparably damaged by serious illness. Many who succumb to an agonising ordeal of dripfed existence, bereft of joy nor purpose. We owe it to these people to allow them the dignity we would afford a house pet.</p>	For over 1 year	<p>Please let us show compassion and love for those who need it most.</p> <p>This is about mercy & pragmatism.</p>
Agree	<p>I agree assisted dying should be permitted in order to eliminate the person's suffering. After all, we wouldn't keep our pets in the conditions that people are sometimes in.</p>	Not Answered	
Agree	<p>I agree that it should be permitted; I have seen family members forced to endure (as I will never call it living) through years of agony because they had no way to find release and they were no longer capable of taking their own lives. If i was in that situation, I'd want the option available to me.</p>	Other	<p>I believe it should be available to any who need it; if people would benefit by coming from the UK then that's for the better too.</p>
Agree		For over 1 year	

Agree	I believe any individual should have the choice to take their own life, it should be a constitutional right. Allowing this with the IOM creates an opportunity to be around loved ones, rather than have to travel to another country, with increased cost & stress.	Not Answered	The model is already there is Europe, the IOM can easily copy that model & make this more accessible for people closer to home. It's a brilliant opportunity for the IOM to again lead in human rights.
Agree	I feel when a person has limited time to live. We should be able to allow them to dignity to go when the time suits them. No everyone wishes to deteriorate to the point they lose the ability to function or care for themselves. We don't allow animals to suffer and we help them when the time is right. We should be able to do the same for ourselves.	For over 1 year	Some questions have to be not sure as it's not so black and white. If someone has mental capacity but unable to function in certain ways, then they might not be able to sign along side their doctors. For now this is just for terminal illness but the bigger picture might mean there are other conditions people suffer with and may wish to take this option. I've selected 1 year for the residency as things can change in a heartbeat but there would need to be tight controls around to ensure it is not abused by people coming over. That could be available down the line, but for now I believe it would need to be closely monitored. As someone who leads an active life style, I understand the need to take this option and leave this world when you know you're no longer able to do what makes you you.
Agree	It should be a human right to be able to select when to die and to be allowed to die with dignity.	Not Answered	
Agree	fortunately I am not in the position where I am in need of this proposal but have witnessed many people who have gone through terminal illness's and would have chosen this option if it were available to them at that time. Your document is very informative and I believe covers all sides of the believe that the person wish to opt for this procedure does not do so lightly and has discussed this with other members of the family. As well as the person confronting this matter the family also has some say in the matter and it is those that will be left behind that possibly take some comfort in knowing there was a dignified way for the person to be in control of when to undergo this process	Not Answered	possibly look into providing some form of counselling for family members after the death even if they were aware and agreed to the wishes of the person.
Agree	It shouldn't just be for terminally ill patients. There are instances where an individual may just want to depart this life, if they lose their independence and are unable to look after themselves as they wish.	Not Answered	There are those of us with no families and few friends (other than work colleagues) who don't want to have to solely rely on healthcare professionals to make the decisions for us if we fall ill. We would like to decide for ourselves whether or not we continue to suffer and 'be kept alive'. This isn't 'living'. This is tantamount to being kept alive for no other reason than fulfilling the Hippocratic Oath. I want to be able to make my own decisions right to the end of my life. It would be preferable not to have to travel to Switzerland, but it is something I'm willing to do. If this is extended to non-residents, then they need to keep their previous domicile to avoid moving solely for tax reasons. I would expect my domicile of choice (the IOM) to remain if I chose this route. If healthcare professionals aren't happy with this, if it does come into the legislation, then they should have the choice not to be involved and that choice to be respected.

Agree	I strongly feel it is unkind to prolong the distress and sometime undignified treatment a terminally l'll person has to endure, knowing they are going to die anyway.	Not Answered	
Agree	There is more to life than just being alive	For over 5 years	If suicide and abortion are legal, how can assisted dying not be legal?
Disagree	As a palliative care nurse I know that excellent end-of-life care can be provided without resorting to assisted suicide.	Not Answered	I categorically disagree with assisted dying.
	Legalising assisted suicide could quickly erode our society's perceived duty of care to those individuals who need it most.		Unfortunately this form me to choose many 'don't know' responses because of the way it is designed.
Agree		Not Answered	I DO know that assisted dying can rapidly become dangerously 'normalised'. Our society currently values all life. Let's keep it that way! This is about letting people have their dignity, giving them the freedom to do it on their terms in a way which is less distressing for themselves and their family memebers.
			I understand that Doctors are worried about ethics and responsibility and therefore the correct paperwork, disclaimers and check must be in place to protect them.
			Finally, in the year 2023, where a religious faith is no longer held by the majority on our Island, it should be time for Government to make a stand. Be a modern parliment, exclude religious views from the consultation and exlcude the Bishop from any votes surrounding assisted dying.
Agree	I believe that it is the right of every individual to choose assisted dying if their quality of life has degenerated to such an extent that dying is preferred to living. It seems inhumane to me to force individuals to continue living when they are suffering mentally and / or physically with no realistic expectation of recovery or relief from their suffering. With the correct controls (such as those suggested in the brief) I am sure that a safe environment can be created on the Isle of Man that enables individuals to make the correct decision (for themselves) to continue with life or end it through an assisted dying process.	Not Answered	
Agree	The media is full of stories of people suffering unbearable discomfort and lack of dignity, but without the power to determine the time and place of their own demise. This should be legally allowed. Personal experience of a loved one passing mercifully quickly with an aggressive degenerative disorder made me realise the suffering of those who don't go quite so quickly, and also for those around them.	For over 1 year	Just to clarify my responses. To Q19 - I said "no" here because they may not be able to write. There should be other ways of confirming their wishes without having to sign their name. To Q22/23 - I don't like the idea of these drugs being collected and "stored" at home - where anyone else could have access to them. A medical professional should collect the drugs and bring them to the patient, and stay with them until death.
Agree	30 years Nursing experience and seen many suffer unnecessarily	For over 5 years	One Medical Professional should be the regular GP from the Patients Practice(if possible)

Disagree	If I disagree, which I do, then none of the answers in 9 below are appropriate. This seems like a biased consultation		Other	All of these answers (this page and overleaf) assume agreement with assisted dying	<p>These questions are all unashamedly biased towards supporting the assisted dying bill. For most of these questions, there isn't an answer that fit with those people whose view is that assisted dying should not be introduced in any shape or form in the Isle of Man. That is my position. I do not support the assisted dying bill in any shape of form.</p> <p>The older generation are very stoic and hate being a burden on anyone else. Family should be there to support them, but the deconstruction of the family has led to them feeling ostracised, abandoned, and now potentially manipulated into choosing their own death prematurely.</p> <p>And I am quite frankly outraged that the Isle of Man government has issued such a biased consultation! What is the point of consulting if you prescribe answers that only fit your desired outcome? which do not fit the respondents viewpoint? Are you scared that peoples views could challenge this bill?</p>
Agree	It would let mentally competent adults stay in charge of their life/end of life. Autonomy, self rule or the right to self determination, is a corner stone of all ethical decision making.	For over 1 year			In relation to my response to Q25 (not sure) I think this should be the choice of the individual. They may wish their end of life to be shared privately with important (to them) others.
Agree	Only for those who are in extreme pain which cannot be alleviated	For over 5 years	Other	I do not believe it should be available at all	<p>This consultation is appallingly badly constructed.</p> <p>I have had to pick 'not sure' for many questions because there is no option for 'neither, as I do not believe AD should be available at all'.</p> <p>EG q 26 - should numbers be published - should have a 'N/A' option because I don't believe AD should be happening at all.</p> <p>The consultation should be redesigned so as not to presume in favour of AD, and reissued: this version is a nonsense.</p>
Disagree	Disagree The risks and consequences of legalised assisted dying being abused or unintentionally misused are too great				
Agree	I believe people should hold the choice on how to end their life if their quality of life has been compromised	Not Answered			<p>If someone is unable to write, could a video request be made instead?</p> <p>I do not think there should be a waiting period of 14 days, 5-7 should be adequate</p>
Disagree	Open to.elder abuse		Other	Manx born only	<p>Some questions here are biased towards assisted dying</p> <p>I am not at all religeous, I passionately supported the abortion bill.</p> <p>However, I just do not believe 'putting someone down' however kindly it is done is the answer. Look at people like Stephen hawking, who with support and care contributed to the end. People WILL be pressured and it will be covered up. Also the impact of deliberately ending a life will have an unbearable impact on the person charged with implementing it. I have no objection to lots of medication to kill pain but a formal one off drug to end life at a specified point cannot be right. I don't want anyone to suffer but drugs are evolving and there are other options. I totally worry about coercion and deceitful behaviour.</p>
Disagree	Whilst acknowledging SOME people will be supported to make the decision without pressure, for others the reality of their decision making will be clouded by other considerations - the burden to others, cost of care or loss of legacy for family or fear.		Other	I cannot reconcile assisted dying but we certainly should not be a destination for it.	

Agree	<p>My Mother suffered in terrible pain after a bad fall she was 95. After X-rays she was sent back to the care home. (using this as example as my mother lived in Southport UK) I was told I didn't need to visit. I went anyway to find my mother who has osteoporosis slumped in a chair with her head on her shoulder. I ask them to re X-ray my mother at the hospital who confirmed a C2 break of her neck known as the hang mans break. She was admitted to hospital. Mum couldn't feed her self and was in terrible pain. I asked the doctors what they could do for her. It will take it's course he said I can do nothing. 12 weeks it took for her to die, suffering memory loss because of the head being down stopping the air flow to the brain. I never want to see this happen to anyone else it was needless as they knew she was dying. Don't let this or similar this EVER happen again it is unnecessary suffering for a patient and there family.</p>	Not Answered	My Husband and I fully support assisted dying. See my comments earlier in the survey.
Agree	<p>The anti euthenasia groups never mention quality of life , we are all in the queue to the grave , if my health deteriorates to the point that I have a negative quality of life , then surely no one has the right to tell me to endure it .My mother died in a hospice and what I saw in there would have resulted in criminal prosecutions had they been animals and not humans.I saw an old lady reduced to a skeleton , shivering under a thin blanket , and what help did she get ? Pain killers ! In my opinion the rubbish dished out against helping a suffering dying human being does not stand up to scrutiny .Why in the grip of a terminal illness have I lost the ability to see what is best for me ? Why would I put financial gain of any relative above my disgust at the indignaties I know will be coming my way , could you really believe a lot of dying elderly are happy with incontinence and the pure frustration it brings with it , and for what ...becoming bedbound and totally reliant on others, in pain or dosed up with morphine .Older people have often been the ones brainwashed with the idea that suicide is a sin and hell be the result,,my belief is that this was put in the Bible when it was rewritten in 300AD because the hope of heaven after the hellish life endured at the time would have resulted in millions of suicides.I believe my soul lives on after death...why should my religious belief come second to a work of fiction concocted 1700 hundred years ago, its beliefs tell me that what I wish for me come second , and I and my relatives have got to put up with my distress at a meaningless extension of this life.As I see it , its not mandatory , even if I'm too far gone to make that decision so what if someone else helps me when they believe my time is up ...what have I gained from becoming a virtual cabbage .As a pet owner I have had to make the decision to call time on a loved pet whose time had come ..why is it different if someone helps me . And please don't use the excuse that I may</p>	Not Answered	<p>only inclusion would be that the individual has on more than one time in the presence of capable witness stated that they wish to be helped end their life in a dignified fashion because they see no possibility in having a quality of life again because they see no possibility of a cure on evidence supplied by a qualified person. (note here I have not specified doctor because during my life I have witnessed an enormous amount of incompetance and indifference on their part , not all . but most. It is my honest opinion they are little more the representative of the pharmaceutical industry and it is a mystery to me why they are held in such high regard and allowed to enrich themselves at the expense of people who fallen ill)</p>
Agree	<p>To minimise pain and suffering in a humane and controlled manner.</p>	For over 1 year	
Agree	<p>All people suffer to some extent if they are ill, injured, or mentally ill even with intervention of drugs. Sometimes it is just too much to bear and there is no hope in the future of life improvement. I suffer daily from pain, caused by an accident a year ago and I have no hope of a full recovery.</p>	For over 5 years	It should be implemented as soon as possible.

Agree		Not Answered	NA	<p>There are people in the community who may want to die and who are preparing for that eventually say , by storing up pills. They may "botch" their attempt and end up very ill and cause great distress to themselves and their families.</p> <p>This is one of the reasons for formalising assisted dying .</p> <p>My main reason is that I think it would be dreadful if you have a debilitating disease which gradually shuts down your body and leaves you totally helpless - and certainly in great distress if you know at some stage you won't be able to breathe. I would rather die calmly rather than suffocating.</p> <p>As in my response to question 8. I spent 27 years as a Consultant Physician in Care of the Elderly and am very concerned that frail, elderly people as well as severely disabled people of all ages often feel themselves a burden to relatives and even to the Health Service.</p> <p>I understand that in Oregon 59 per cent of those opting for an assisted suicide in 2019 cited the fear of being a burden on family, friends and caregivers as their reason for seeking death.</p> <p>Another problem is the difficulty, even for experienced clinicians, in accurately estimating a person's life expectancy even when they are suffering a terminal illness.</p> <p>The fact that many people faced with chronic illness or malignant disease may suffer episodes of depression, which may be treatable or transient, also complicates decision-making by patients and advice given by clinicians.</p>
Disagree	<p>I spent 27 years as a Consultant Physician in Care of the Elderly and am very concerned that frail, elderly people as well as severely disabled people of all ages often feel themselves a burden to relatives and even to the Health Service.</p> <p>I understand that in Oregon 59 per cent of those opting for an assisted suicide in 2019 cited the fear of being a burden on family, friends and caregivers as their reason for seeking death.</p> <p>Another problem is the difficulty, even for experienced clinicians, in accurately estimating a person's life expectancy even when they are suffering a terminal illness.</p> <p>The fact that many people faced with chronic illness or malignant disease may suffer episodes of depression, which may be treatable or transient, also complicates decision-making by patients and advice given by clinicians.</p>	Not Answered		
Agree	<p>only fair to allow people to avoid painful and slow, degrading spiral towards death, if it is unavoidable. As you would for a beloved pet.</p>	Not Answered		<p>honestly, I realise that some will worry the system could be abused, and what system in the world is not abused by some. However, when it comes to a person's dignity, and their heartfelt wish not to suffer any longer, how can we honestly prevent their assisted death.</p>
Disagree	<p>It's not respecting life</p> <p>And putting a kind of responsibility to their loved ones</p>	Not Answered	Disagree with the above	<p>Can't answer the above as totally disagree</p> <p>It's awful</p> <p>Maybe it would be better for them to stop taking medicine which is keeping them alive so that they can die naturally</p>
Agree	<p>My husband suffered mental problems and the prospect of losing his life. He was 80 years old. Due to covid it he was forced to isolate each month after six monthly hospital journeys to Liverpool. At that time I was looking after my son who was unable to shop because of a road accident. Therefore I moved in at these times to his house to prevent me being infected. My husband was under suicide watch however he took his life whilst I was out. Suicide is their only solution however to return home and be unable to access one's home and have police break down the front door to find he had hanged his self is a terrible experience for all involved. A peaceful end to his life would be more humane. I'm in full support of assisted dying and hope no one else has to endure the same as I . Yours faithfully Mrs Robbins</p>	For over 5 years		

	Disagree	Totally unnecessary		Other	10 years minimum		The process should be stopped
		Unethical on moral grounds					
		Law can be changed further					
	Not Sure	I believe the issues are more complex than either side in this debate is presently acknowledging in public; retired doctor friends whom I have asked also disagree. I would like to see a forum convened as part of the consultation process, bringing together representatives of the various professions likely to be affected by such legislation, and those of varying religious / philosophical / ethical viewpoints. My personal instinct is to oppose such legislation , but if, as is likely, it receives assent and eventually becomes law, it needs to be the best possible, not least as a model for other jurisdictions. I am also concerned lest this be progressed too hastily; apart from the fact-checking required of statements by both sides in the debate, we need to think about what unintended consequences there might be, what necessary safeguards should be put in place, and so on. The kinds of decisions involved under such legislation are potentially irreversible, and we cannot be too careful. Finally, Dr Allinson was given leave to introduce a bill for this, 'and for connected purposes': the content of that phrase needs to be explicitly stated.		Other	At least 10 years; people should not move here in order to access such provision		Q9 re life expectancy - less than 6 months, perhaps 3. I gather that in Spain individuals can ensure that their wishes are set down on their medical records in advance. Finally, it did feel that many of the later questions are predicated on acceptance of the right to assisted dying; I have answered them on the basis that such legislation is likely to receive assent and therefore needs to be as fit as possible for purpose, even if the purpose is one of whose rightness I am at present unconvinced.
	Agree	Individuals should have the freedom to choose.		For over 1 year			
	Disagree	I feel people will be pushed into making decisions they don't want to make. I had experience of this when my Dad was in hospital, he was asked in a & e did he want to be resuscitated, he said no. A few days later, the sister on the ward asked my sister and I the same question, We told her, my Dad had told them himself what his decision on that was. At a stressful time, we were being asked to over rule our Dads decision, which is all wrong!		Not Answered			
	Agree	I believe people should have the choice to die with dignity.		For over 1 year			
	Agree	When a person lacks the ability, by way of disease or other terminal ailments, to end their natural days in a pain free (mental or physical) state then they must be allowed to end their own life with both the dignity and timeframe of their choice. As is often said, we would not see an animal suffer and would kindly hasten their eternal relief. This is a common sense argument often leading to religious fanatics Quoting a book stating their beliefs.		Not Answered			
	Agree			For over 5 years			

Disagree	<p>I fundamentally disagree with assisted dying.</p> <p>Suffering is very subjective and not inevitable. It is wrong to frighten vulnerable people by saying that they will inevitably suffer.</p> <p>The various parts of the IOM health and social care service can come together to provide excellent end of life care. Time leading up to death can be very valuable in a patient’s life and for their family – a time of reconciliation.</p> <p>The key arguments against assisted dying are:</p> <ol style="list-style-type: none">1. The choice to die becomes an obligation to die. In Oregon, 54% of people seeking assisted death said they did not want to be a burden on their family.2. Safeguards don’t work. No jurisdiction has developed a system for assisted dying that protects vulnerable people. Every year in the British Isles, over 500,000 elderly people are psychologically, physically, sexually or financially abused, most often by family or caregivers. How do we protect them from relatives wanting a quick end or receipt of an inheritance?3. Danger to rights of disabled people. Assisted dying legislation erodes the idea that all lives are valuable and worth living. “I am fearful that any change to the current law prohibiting assisted suicide may adversely affect how the wider community of disabled people are treated in the future.” Baroness Jane Campbell4. By moving ahead of the rest of the UK the IOM may see an influx of seriously ill patients awaiting the qualification period creating an extra workload for IOM health services	Not Answered	Please see my comments in the previous open text question.
Disagree	<p>Dying people are not asking for this, it seems to be a political move. I have worked here for over 20 years and cared for people at end of life and nobody has ever asked for this or said they would want it to be available. Our hospice and palliative care here is good and I think should be better funded to be able to be excellent rather than spending money and doctors time on ending life.</p> <p>All the evidence I see from other jurisdictions that have gone down this route shows that safeguards are not sufficient, that they get removed or changed after a court case, and the 'service' is offered to more and more people. The only real safeguard to protect vulnerable people is to leave the law as it is.</p> <p>I am very concerned about the pressure this can put on people to end their lives this way rather than be a burden on healthcare or family. This kind of pressure is not easy to discover or safeguard against. Similarly coercion can occur. Even just one case of this is one too many.</p> <p>There are all sorts of practical problems. No drug has been approved for this purpose and different combinations of huge amounts of drugs are being used in different places. None of this is evidence based and it is certainly not health care.</p> <p>I believe this bill has the potential of causing suffering and goes completely against the medical oath of "First do no harm"</p>	Not Answered	<p>It is very difficult to answer many of these questions as most of them presume agreement with assisted dying in principle. I am completely against this. The preamble and the questions in this consultation are leading and biased.</p> <p>It is very dangerous to leave lethal medication in someones home as there is no control as to who has access to it. I believe this bill has the potential of causing suffering and goes completely against the medical oath of "First do no harm"</p>

Disagree	<p>As a trained nurse it has been my privilege to sit with people who are dying. Not once did they ask to be assisted to die. Palliative care was very much a part of the role of a nurse in the past and one hopes that today with the Hospice it still is. Morphine in increasingly large doses puts people into a twilight state which eventually eases them into death. This practise has been carried out for many years.</p> <p>I think that it would be putting an unnecessary strain on elderly people to have themselves ‘removed’ in order to lessen the burden on their relatives. I have noted from the news that a young woman of 30 in Holland was assisted to die because she was depressed. Is this something we want here. I do not know of any doctors, apart from Mr Allinson who seems to be in favour of it.</p>	Not Answered	<p>I have not answered any more questions as I am not in favour of this bill. I am well aware of the dreadful illnesses that can befall anyone but I think that palliative care should be researched and improved.</p>
Disagree	<p>Assisted dying opens the door to situations where a person can feel under pressure to opt for this rather than be a burden to others. Once approved in principle the experience in other countries has been that it becomes extended beyond the original boundaries, such that in some countries even children are included. My own experience of someone with Motor Neurone Disease was that his attitude to living was changeable at different stages in the disease. The developments in palliative care mean that pain and distress can be managed much better than previously and this area of medical care is improving all the time. In addition, it is not certain that people receiving lethal drugs actually do die without pain, because they go through a stage where they are not able to communicate.</p> <p>I also believe that if the principle is established that doctors can approve or administer lethal drugs, then the patient/doctor relationship changes. A doctor's role is to preserve life and heal until such time as this becomes impossible.</p>	Not Answered	<p>There is a lot of confusion among the general public as to the difference between assisted dying and allowing nature to take its course. With reference to Q27 a "living will" may contain a "Do not resuscitate" desire but some people I know confuse this with assisted dying and could be persuaded to include it without understanding. People change their minds and a "living will" should be overridden by the patient's desire at the time if they have capacity. With reference to a patient being able to collect and store medication at home until ready to take it, this allows lethal drugs to be at large in the community and is clearly open to abuse by unscrupulous family members or other individuals.</p> <p>Looking at what has happened around the world where assisted suicide has been introduced it is clear that once the principle has been established, the limits and safeguards become stretched and changed. It is a dangerous decision to take and we should, instead, be working to make end of life care effective and pain free. A lot more should and could be done to help terminally ill patients psychologically so that they can end their lives postively without the need to request assisted suicide.</p> <p>I am also concerned that if assisted dying is introduced, there might be pressure to opt for that instead of end of life care and that this might affect the ability of the hospice movement to offer the excellent care they give. I walked alongside a friend through end of life care in a hospice and it was the best possible way to cope with terminal cancer.</p>
Disagree	<p>I believe that there are too many grey areas, which may lead to exploitation of vulnerable people. If a person who does not have capacity is in intolerable pain they do not have the same rights under this proposal and this has not been addressed. If a person has mental capacity, but not the physical capacity, they do not have equal rights to those who do. This is a poorly thought out, dangerous and flawed proposal. Looking to Question 9, 10, 11 the option of No is missing</p>	Other	<p>I don't agree with this proposal, but have to answer</p> <p>This Consultation Survey is poorly thought out and limits the opportunity to answer fully, therefore is not a reliable tool for gauging the public.</p>

Agree	<p>Because I believe that there are circumstances like intolerable pain (despite best management) or chronically debilitating degenerative illnesses that can make a rational thinking person genuinely wish to terminate their own life.</p> <p>When a person’s quality of life deteriorates to this extent and they have concluded that self termination is the best outcome (be it through intolerable pain or late stages of a degenerative illness), I believe that enforced and unwanted continuation of life is disrespectful and cruel.</p> <p>Obviously the two qualified persons deciding suitability would first need to follow carefully prescriptive criteria and also ensure that no coercion had taken place.</p>	Other	See 13.	Only great care in the wording of the draft.
Agree	<p>Having worked in the medical profession all my life,I can categorically state that in all cases I have experienced in end of life care, it has enabled dignified, respectful and calm death. Support, emotional and physical given to loved ones and the ill person. Never coerced or pressured. Always relieved and accepting of their choice and maintenance of dignity in their choice has been respected.</p>	Other	<p>If there is no legal availability for care of the dying , assisted dying as long as all legal requirements are met for their decision and the competence levels of all concerned are strictly and regularly monitored.</p>	<p>With regard to signing a declaration. This is dependent on their capabilities/disability . If they have a living will or written directive,this should be respected. If these options are not in place Inferred or verbal consent should be sufficient when the criteria of 2 doctors etc., has been obtained.</p>
Agree	<p>I watched my father slowly dying over a four year period. It started with prostate cancer and eventually developed into bone cancer. Every movement was painful for him and for us to watch. His favourite saying was 'if I was a dog they would have put me down months ago. Why do dogs get better treatment? He was ready for 'the long sleep' as he called it, but no he had to suffer the indignity of being double incontinent, wearing nappies, being washed by carers, etc., not able to go out, not able to move from his bedroom. At least my mum was able to look after him at home, with the help of family, friends and carers, but he was ready for 'the long sleep' and said so many times. When he died he was skin and bone, he wasn't living, he just lay in bed looking at the ceiling waiting to die and it took four sad, painful years.</p>	Not Answered		<p>Yes doctors should ask questions of the patient, know that the patient is prepared for what is to come. Make sure that the patient knows that there are alternatives, hospice etc, but really you are just putting off the inevitable. At least with assisted dying you, the patient, can make the decision when you want to die, not nature taking its course.</p> <p>Personally I think that there should be a health professional present at the time of the patient taking the medicine. Not necessarily in the same room with the patient and her/his family etc, but someone should be present for any medical complications.</p> <p>In my opinion assisted dying should be available to all ages, young and old. Some young people know their own minds, especially when they are dealing with life limiting disabilities/illnesses.</p> <p>The Isle of Man should also be open to others for assisted dying.</p>
Agree	<p>I have been involved with end of life care for several people and have seen unnecessary suffering as pain medication is given out in the least amounts possible. I would like the decision for myself and loved ones to be able to have the choice of assisted dying</p>	Not Answered		

Agree	I think it is your choice and if you are terminally ill or have a progressive illness that would lead to having no quality of life or being unable to recognise your loved ones or be incontinent and have no dignity left	Not Answered	Living will provisions should be included as there might be a case when the person doesn't realise what is happening to them if it is a quick onset of illness
Agree	There should be dignity in death. We treat animals with more compassion than we do humans.	Not Answered	It is desperately important that we, as a nation, provide dignity in death. With the correct oversight and safeguards we can pull ourselves into the 21st century. Only a few years ago a person's right to an abortion was passed in to law, assisted dying is simply another form of bodily autonomy. Assisted dying would also take alleviate great deal of pain and trauma experienced by families and emergency services currently caused by suicides, naturally this requires heavy oversight and assessment over an extended period of time. Unfortunately suicides will happen, the very least we can do is make it as pain free for all concerned.
Disagree	As a believer of God, I believe that life is from, God given. Only him can take away any human life.	Other	No comment Where ever we are we should not assist them let them die in their own time
Agree	I am fit and well. I have had a stage 4 tumor and been through all of the treatment, including surgery & radio therapy needed to completely eliminate it. I am fit and very well and am extremally grateful to the Manx national health service and Clatterbridge Cancer Centre for saving my life and ridding me of this curse. I have been extremally lucky. My step father (living in Harrogate in Yorkshire) was very unfortunate to suffer a stroke and a heart attack at the same moment on the same day after a massive amount of pressure nursing my mother who had terminal cancer. She died weeks later after 2 years of living with agonizing pain of terminal cancer. He lived in a hospital bed for the next 7 years curled up in a ball locked in, could not communicate at all and eventually died of a chest infection, because the only way we could help was to acknowledge his indication that he should not be resuscitated. Brain damaged beyond repair and in who knows what mental and physical agony. If I had been in the same position I would have opted for suicide. I now wish to opt for suicide or assisted dying firstly if I am diagnosed with a terminal illness and secondly if I cannot make the decision for myself. why would anyone want to carry on. Its time to bite the bullet if you will excuse the pun and let people have control over their own lives and more importantly deaths.	Not Answered	I am sure that people who for whatever reason cannot sign the directive should not be denied assisted suicide just because they cant sign a form. Also if a person is terminally ill an advanced directive or living will should be accepted as their wish to end their life.

Disagree	<p>Every life is a gift from God, the creator of heaven and earth. Each life has a purpose. Every Life deserves a chance no matter how bad the situation is. We all have an ending one day but only God, in His time, should end it. As the bible says in Ecclesiastes 3:11- God has made everything beautiful in its time. He has also set eternity in the human heart; yet no one can fathom what God has done from beginning to an end.</p>	Other	I totally disagree with assisted dying	
Agree	<p>At the age of 21 I lost my parents within 6 months of each other, my mother dying of cancer after only 6 months from diagnosis, she died in hospital under horrific circumstances having been starved of any substance towards the end of her life, having lost 3 stone in weight at the time of her death. It was an horrific and almost violent death which I had to endure at an early age, despite attempting to carry her out of hospital back to home where she could die with a little more grace and dignity. I was stopped from doing so by the hospital staff and my 3 siblings. At the time it was more convenient for them.</p> <p>I on the other hand was desperate to remove my mother from hospital where she was dying a very stressful death and only wanted to die at home. The shock of my mother's death effected me greatly and ended up with me leaving the hospital in a mood of despair which resulted in me smashing the glass in the doors of a nearby shop, which resulted in the police and the owner of the shop arriving to find me sitting in the doorway in a distressed manner. Fortunately both the police and the shop owner knew of my family and understood my mood, which resulted in myself spending the night in the police headquarters (not in a cell). I was not charged for any offence but luckily neither did the shop keeper require and punishment or recompense.</p> <p>Just 6 months later my father also passed away in his own bed at home peacefully despite lots of effort by myself to occupy his mind and hopefully taking helping him come to terms with his loss of the woman he had loved for 50 years or more.</p> <p>I insisted that none of my so-called siblings were involved in the last years of his life and in fact I was the only family member present at his death and arrangements were down to me for him to be buried with his wife.</p>	For over 5 years		<p>I believe that all the answers to the previous questions contained within this document cover any further questions that may arise.</p>
Disagree		Not Answered		<p>Quite a number of the questions were so phrased that answered either Yes or No would have meant I would be agreeing to Assisted Dying, which I am NOT - THUS I had to choose not to respond.</p> <p>If the proposed Bill passes, ALL applicants for Assisted Dying should undergo 2 psychiatric evaluations, including the need to safeguard people against being coerced into taking such a step!</p> <p>Presence of lethal, unregulated drugs in people’s homes is dangerous.</p> <p>Everything should be open to public scrutiny!</p>

Disagree	1. This proposal goes against Manx principles and culture	For over 5 years		This is an appalling proposal. Not Manx, not human and not civilised.
	2. The last thing we want is for the English to understand that they may suicide here			
Agree	My husband was terminally ill and in unbearable pain for months. It was a relief for him and his family when he died. If I had kept an animal alive in pain like that, I would have been prosecuted. I sincerely hope that the law will change to enable me to have dignity in death at the time of my choosing should I become terminally ill. I do not want to suffer, or for my family to suffer the way we did when my husband was dying. I believe that I should have the right to die in such circumstances and that no one should be at risk of prosecution for facilitating my wishes.	Other	It might be that a family member or close friend has to travel to the island to be able to die with loved ones present to give support if they have no one where they live.	At all times the patient's wishes should be respected.
Agree	Dignity in death is humane. Prolonging suffering is not	For over 5 years		
Agree	While I sincerely hope never to be in the position of facing death with my mental and/or physical faculties reduced to a state of near non-functionality, I firmly believe that while I or others, who still have the mental capacity to recognise the hopelessness of their situation with regard to either enduring pain or debilitation, should have the right to decide upon when and where departure from this existence is to take place.	Not Answered		
Agree		Not Answered		
Agree	Forcing people to live for months or years in pain is inhumane.	For over 1 year		Question 25 - the medical personnel should be near by after the pill is taken but not necessarily in the same room so as to not be in the families way when grieving.
Agree	As a nurse of many years, I have personally witnessed the futile, undignified and degrading practice of people being 'kept going'. I do not wish this to happen to me. I wish to be able to end my life when I feel too disabled to continue. I am already considering suicide options for when the time comes. These options are all unpleasant and will be additionally traumatic for my family, compared to a supported medically supervised euthanasia.	Not Answered		This questionnaire would have benefitted from more options to make comments. At times I have answered 'not sure' due to the lack of the option to make comments. Eg 7 days advance thinking time for someone with less than 30 expected days to live - they maybe in agony and indignity with poorly controlled symptoms. With health care in such a rotten state and so under funded, will they get the dignified palliative care that they need? Also who can say under 30 days to live? Also, provision should be made for people with long term illness such as dementia. I certainly am planning to avoid the indignity of this protracted, distressing and lingering end. I would much prefer to be medically supported with this option.
Agree	I have experienced several people who died after being terminally l'll, there death was far from acceptable and they passed away after suffering quite a lot despite having palliative care	Not Answered		I cannot see any argument for not going ahead with this as doctors are quite happy to add a do not resuscitate even if the patient is unaware of this

Disagree	It is slippery slope to it becoming nothing more than a money saving exercise and is open to abuse. Much easier just to sweep people under the carpet. No matter how robust the safeguards are felt to be there have already been a number of horror stories in the press of it being offered elsewhere completely inappropriately. It is interesting that Dr Allinson also led the charge to legalise abortion on the island.	Not Answered	It seems from these questions that the decision has already been made. I was unable to answer a number of questions accurately due to their post approval nature. A Doctor swears an oath to do nothing more than save lives, not assist in taking them. This will become a very dangerous road and will just be a stepping stone to more nefarious legislation.
Agree		Not Answered	I ticked 'longer' for question 9 as I feel it is vital that people diagnosed with Alzheimer's disease or similar neurodegenerative diseases are given the opportunity to end their life with dignity while still able to find comfort in the presence of their loved ones. Any time limit on terminal diagnosis risks forcing such patients to face a despicably cruel death against their will or having their loved ones potentially face the agonising choice of either allowing them to endure such a cruel death or face prosecution should they agree to help them to end their life.
Agree	I believe it is the right of people who have capacity or have made their wishes known by a living will to make their own choice. I cannot imagine having to live with a life limiting condition without having the option to choose to die when I felt the time was right for me.	For over 1 year	I fully support Assisted Dying
Agree	Why make terminally ill people suffer longer than they want to? Some illnesses do tremendous harm to the sufferer, taking their ability to have even brief moments of peace. It is naive to think that palliative care solves this or gives people a "good death". If you have seen someone have a terrible death, you wouldn't wish it upon your worst enemy.	For over 1 year	
Agree	There is dignity in dying and through choice to end your own suffering. People often say having an companion animal euthanised is the kindest thing to do to alleviate pain, why should humans be denied this right?	For over 1 year	There is a fine line between enabling assisted dying where not necessary and unnecessary discouragement. Furthermore, terminal illness within is too strict a boundary. If an individual is aware they are at risk of neurodegenerative disease (as an example) they should be able to obtain to preliminary assisted dying in the event they are unable to consent in the event of it occurring. Some individuals can live for years with alzheimers or dementia which can be incredibly stressful and painful endure. Forgetting who they are and how to keep themselves alive. There should be a more in depth questionnaire to ensure that this is not abused/taken lightly but also prevents people of certain beliefs to deter people from making a choice that is ultimately noones business but there own (like abortion). This would prevent any unnecessary abuses on both sides of the coin. People deserve to have choice and to die with dignity.
Agree	personal choice	For over 1 year	
Agree	Science has overtaken the natural order of life to such an extent that, in the case of dying when the prognosis is terminal, it has turned from caring to cruelty.	Not Answered	

Agree	It is reassuring to believe that if I had a terminal illness & suffering unbearably, that I had some control. In other words, I would have the power to end my life when I had had enough.	Not Answered	No
Agree	I think it should be considered a basic human right for an individual to be able to choose the time, manner, and place of their death should they suffer from a terminal illness which they know is likely to result in a reduced quality of life.	Not Answered	
	My father is in the end stages of Parkinson's. The disease has been relatively kind to him, but he is now at the point where, in accordance with his wishes, he should be allowed to die, at home, surrounded by family.		
Agree	Do not choose to live if I have a poor quality of life. I am single & live alone. If my mobility is poor Memory is poor Incontinent & unable to manage myself Need another to shower/ bath Difficulty swallowing NO AGGRESSIVE TREATMENTS IF ABOVE MEAN ANTIBIOTICS NASAO GASTRIC FEEDING	Not Answered	Need to ensure ADEQUATE HYDRATION, maybe a drip As dehydration causes a painful death Can cause falls Liverpool pathway caused much suffering with lack of PAIN KILLER & HYDRATION if feeble, may need to TURN PERSON TO PREVENT BED SORES Ideally in a HOSPICE if possible
Agree	I feel that it should be my choice when I decide I want to die	For over 5 years	I think it is wrong to prosecute anyone who helps in helping someone to achieve a peaceful death if that is their wish and desire
Disagree	I do not agree I think it puts people subtly under pressure to end their life. It also puts doctors in a very difficult position. I think palliative care is improving all the time!	Not Answered	I can not answer most of these questions as they presume I agree with assisted dying in principle which I DO NOT. This process in itself is coercion by people in so called power. Will they ask us do we want to die a) a bit, b) quite a bit or c) a lot!!!! Even make up adverts say along with the percentage how many people answered the survey this has been left out!!!
Agree	The key principle is autonomy. We should all have the choice.	Not Answered	
Agree	Everyone should have a choice about their death. Suffering can be minimised. Dignity can be maximised. It will not result in extra deaths, everyone has to die anyway. It just saves years of pain and suffering	Not Answered	
Agree	Dying with dignity before losing all dignity is really important to me.	For over 1 year	

Agree	My mother is rotting away with cancer and dementia and she should have the right to choose how and when she dies	For over 5 years		Make it three doctors and that way it can't be one for and one against letting person chose when they die also if the doctors say no . After a month person should be allowed to apply again with different doctors ... The doctors union are already sending leaflets out to people's homes and a month ago in December 22 a doctor gave me a lecture on it while I was having a check up at hospital which I did not ask for or want .that needs to stop immediately!!
Disagree	I think its very unfair decision for patients to have to take that kind of decision when there is such good pallative care on the island. To me it opens the door for many other people who are depressed and disabled and leaves vunerable people who maybe taking perecribed medication to take this step a bit closer to taking their own lives (which is already a big problem on the island and they don't need a law passed to make this an easy option.	Not Answered		
Agree	I believe that adults should be able to die without pain and with dignity. Prolonging the death just causes distress to the person and their family.	Not Answered		
Agree	It is my right to die in the way I choose and I would like to thank Dr Alanson for all his hard work with assisted Dying.	Not Answered		The less you include doctors the better as it is impossible to see one now IOM health service is truly appalling and people are dying now with the lack of heath care I understand that the general rule for the medical profession is to preserve life but it cannot be to the extent that the patient suffers. If the patient is mentally sound, they are affected by a terminal illness and wish to die then quality of life should take priority over preservation of life.
Agree	I believe it's only fair that a person who is terminally ill and wishes to end their own life is not punished for their decision. If their are of sound mind and it has been decided that the patient is terminally ill by the medical profession, they should be allowed to determine the end of their own life.	For over 5 years		
Disagree	There is no 'reversal' of these drugs. The Finality is severe there always more research and developments that can be made within palliative care and mental health care that could omit the need for anyone to feel they would need to end their life. The Danger of those ending their life that, with the correct medical attention could recover would be far too high.	Not Answered		
Agree	Although there has to be safeguards to ensure as much as possible it is what the person wants, people should not have to suffer. There is a limit to the pain relieve long term. Even if one of the reasons a person gives if not to be a burden, a person shouldn't be forced to be a burden if that's not what they want. And they should never be made to feel shame about wanting to end their life.	Not Answered		
Agree	Right to Die with Dignity	Not Answered	Allow anyone wishes to Die with Dignity	

Agree	Having seen M.N. leaving a person with totally sound mind who can do nothing for themselves, swallow and eventually breathing. It's utterly cruel. Later I watched my mother dying of cancer in unbearable pain. She had morphine at home. When she was admitted to hospital for the last time, she was crying, begging me to kill her. She said if she were one of my animals I would have already done it. She was right. I would have. Instead I watched her trying to climb walls, getting in and out of bed. She fell a couple of times. Instead of getting her pain under control, her bed was pushed against the wall and sides put her bed. It was hell to watch. It was arranged for her to go to hospice. When I arrived for her transfer she was suddenly back on a ward and sitting fairly quietly. She must have been sedated. Once in hospital her pain was under control very quickly. She went to sleep and I went to work. A short time later I got a call to go back, Mum was in a coma. I was later told that fighting the pain kept her alive and exhausted and she would probably have gone sooner if pain was under control.	Not Answered	Children can have diseases/conditions too. If they things are going to get worse, they deserve a say too. Also it is up to a individual if they want anyone other than their loved ones and pets around. Close by perhaps. Consider if they want to be organ donors or for science research before hand to see if it's a option. It might offer the sick person or family some kind of comfort
Agree	A lot of pain and suffering is experienced in the last weeks / months of a terminal illness. If a person is of sound mind I believe they should have the choice to end their own life early and avoid this suffering.	Not Answered	People with a long term debilitating condition where their standard of life is not being met to basic needs should have the option to enquire about ending their own life. Under 18's with terminal illness should also have the right to end their own life's with in the guidance as well. Parental consent is the issues here.
Agree	If there is no way put and life is just about pain and suffering and people stated they don't want to be in such a position, I think it is human to assist in dying.	Not Answered	I was shocked reading a leaflet brought to me by ManxDuty of Care. It is poisoning assuming vulnarable people will become a victim of relatives! And than the awful paragraph about The Netherlands. We spent years on good legislation protecting doctors and give individuals a choice. Got very upset reading this. I trust the lovely and wise people on the island. Let's get legislation done!
Agree	It should be a person's human right.	Not Answered	
Agree	If I was terminally ill and facing a long, drawn out death - I would like to be able to make the choice to end my life peacefully, with dignity and on my own terms. I believe that I should have autonomy over my body and agency over my death. I would like to choose NOT to put my loved ones through the ordeal of witnessing me slowly deteriorate into a breathing corpse.	Not Answered	

Disagree	<p>It is against the oath medical doctors take to preserve life.It is against the code of conduct for Nurses.It is unethical and leaves vulnerable persons open to the possibility</p> <p>lty of abuse and coercion.as recently in Canada disabled persons have been offered assisted death or Euthanasia.</p> <p>It has no place in medicine within our society.</p> <p>The practice would be against God, as a Christian society.</p>	Not Answered	<p>Dont agree with any of these questions.option of dont agree is not included,therefore biased</p>	<p>This bill is inhuman.</p> <p>It is un Christian in its intention</p> <p>It is medically and morally wrong to enable another persons death.</p> <p>It is abuse and overreach of the medical system and those who seek to enact it</p> <p>I have nursed for all of my working life and the process of death should not be a medical one but a spiritual one.</p> <p>I feel strongly that this bill is unwanted,unneeded and serves the establishment much more than an individual,in my opinion it is corrupt.</p>
Agree	<p>Yes, and believe that you should go further and allow assisted suicide as in Switzerland. This is for reasons of compassion towards those whose suffering is so great they wish to end their lives. Systems frequently fail and people fall between the cracks and people shouldn't be forced to travel to Switzerland but should be able to die here should they choose to do so.</p>	Not Answered		<p>The questions above seem, understandably, to focus on Manx concerns but having investigated the options in Switzerland why not just fine-tune their protocols? The answer, might be that at this time, this would be too controversial, but where would be a good model to learn from and apply here?</p> <p>I found the information leaflet received in the post purportedly from medics to be quite ill-informed and misleading and hope that regardless of what decision is taken on assisted dying the evidence will be more seriously considered. At the very least, I hope it leads to more support and compassion for the sick, elderly and disabled and more joined up health and social care that is patient-centred.</p>
Disagree	<p>Safeguards can not make absolutely certain that a vulnerable person or any person may not have the wish to leave rather than to die if Doctors who promise to care for patients are put in a position where they are forced to facilitate what might be a passing whim.</p> <p>Like Judges passing the death sentence on an innocent person.</p> <p>Palliative Care and especially our Hospice do alleviate suffering so that there is no need for assisted dying law.</p>	Other	<p>This exposes the administration that would be required to be certain about residence qualification.</p>	<p>My "Not sure" answers are my indication that the Assisted Dying Bill is an abomination and should be scrapped.</p> <p>All the administration required by medical professionals including chemists is not proportionate to the need if it even exists.</p> <p>The Bill if enacted will have the opposite to its intended effect. It would just regulate suicide.</p>

	<p>Agree I believe that certain states of being are worse than death. In my nursing career of 40 years I have witnessed people who express a wish to die quickly and painlessly, as of course we will all die eventually, but there was no safe or easy route open to them. I have heard the argument that anyone can commit suicide, and strictly speaking that is true, if one can access the means to do so. However it is a very frightening prospect, as it would either by violent means, not only awful for the person, but for those who find them and the loved ones they leave behind. Another alternative is taking poison or some kind of drug overdose - but these could potentially cause a great deal of suffering and may not result in death as the person would not know how to do it properly. The other option is knowingly dehydrating oneself by refusing all fluids, but it would require sustained will power through suffering for the up to 14 days it would take to die. Some people, I believe the vast majority, would never be able to do this unaided and would therefore be condemned to die slow, often agonising deaths, full of fear and very difficult for their loved ones to witness.</p>	<p>Not Answered</p>	<p>I think there should be the option of the death happening in an alternative venue to the person's own home. This could be some sort of clinic, like Dignitas in Switzerland, or dying in a friend or family member's home.</p> <p>I answered "not sure" to Q25 because I think that it would be acceptable to have a non health professional, but someone linked to registered voluntary sector organisation, what is sometimes referred to as a "death doula" - akin to the non-midwife supporters of women during the labour and birth of their child I am a nurse myself, therefore I am a healthcare professional and I would feel very comfortable to be able to accompany the person through this journey and help ensure their dignity at the time of their passing, but I can see that there would be other caring and sympathetic people who could fulfil this role.</p>
	<p>Agree I have worked as a Hospital professional for the last 37 years and seen so much suffering from patients coming to the end with no quality of life at all generally in constant pain and misery, quite often asking to be allowed to die. All we do is prolong the misery and suffering because of outdated views.</p> <p>This should be implemented immediately!</p>	<p>Not Answered</p>	<p>The option for assisted dying should be given to people with early onset dementia so they have the choice before the condition worsens.</p>
	<p>Agree I strongly agree! People should have the choice on what to do with their own body and have full control of it. No one should suffer unnecessarily. If this bill wasn't passed then I think people will just commit suicide anyway sneakily and in a much more dramatic way. This would be extremely sad for the individual having to lie and hide away from their loved ones. This would also be terrible for the families having to find them or know they were suffering that badly that they had to commit suicide and the government was not supporting them. This bill is long overdue and I support it 100%</p>	<p>Not Answered</p>	<p>Although I strongly agree with the proposed bill, I have extreme worries about the possibility of medication being allowed to be collected by the person who wishes to end their life or their relatives collecting and kept within the home. This medication could easily get into the wrong hands or lost and could have terrible consequences or lead to an awful accident. I personally believe that this medication MUST be provided and given to the patient by a doctor and have the doctor present at the time whilst it is administered. In my opinion it is the only safe way. I would be more than happy to pay more tax/NI to ensure this process could be followed for those who may need it.</p>

Disagree	<p>I feel the whole process is flawed.</p> <p>I am 79, born 1943 mother age 46 and father 51 they had a normal life expectancy.</p> <p>I grew up among family members who were significantly older with a different generation of values.</p> <p>One could feel that I was best suited to the previous generation but I was learning from the wisdom of my elders and their experiences.</p> <p>Due to the age difference, most of my family members are deceased and I have witnessed parts of their lives and processes leading to their demises and how they died.</p> <p>Families were bigger, the deaths were bigger and included many different causes that we are aware of in the larger community.</p> <p>What I am aware of is the way the health and care professionals in my experience have managed situations with suffering family members and their immediate family.</p> <p>These complex situations, using human understanding and state-of-the-art care for the period cannot be improved by introducing a Bill and laws that would be overwhelming in detail and interfere with the way society manages affairs reasonably.</p> <p>Rules and Regulations, Laws are for protection when all else fails. A ‘work to rule’ is a shackle leading to discretion and a review of the problem.</p> <p>I can submit much more against this consultation and you may consider holding a public enquiry into the matter. viz. misguiding the public.</p>	Not Answered	<p>I can submit much more against this consultation and you may consider holding a public enquiry into the matter; viz. misguiding the public.</p> <p>The preamble refers to Cruse with local phone number. this is incorrect and should read Cruse (Isle of Man) which is not necessarily scrutinized by Cruse in the UK.</p> <p>Further, it addresses anyone with a concern. I have been deeply upset by the matter for a long time and more so by the prosed bill and consultation process. My blood pressure shoots up, hence this late response. Thankfully, a group of doctors in actual practice, have given me some relief by writing to the Manx Independent 9 January 2023. They have expressed my concerns and I also applaud the circulation of a leaflet by Manx Duty of Care.</p>
Disagree	<p>I feel that a Doctor should not be put into a position where he/she would be responsible for the death of another human being, either by having to inject lethal drugs, or by providing lethal drugs so to cause the death of another human being. Surely putting that burden on another could only cause anguish in many cases, either to a Doctor or accompanying staff and family.</p> <p>I could not be responsible for such a decision personally. I do not wish to have a painful death, but I do not wish for another to be responsible for my death</p>	Not Answered	<p>I have not answered many of the last questions as I am unable to equate them with my earlier answers Re: I am unable to agree with assisted dying</p>

Agree	<p>I am a religious person and I attend Church regularly. However, I think it is the individual's right to be able to terminate their life due to unbearable suffering or to avoid a painful death. I also do not wish anyone to have to terminate their death earlier than necessary, because of the need to travel to Dignitas in Switzerland or the like.</p> <p>I have personal experience of caring for my mother, at home, under the care of the Hospice (not in the Isle of Man). Although doctors / healthcare professionals state that end of care provisions have improved and that pain can be avoided, this was simply not the case for my mother, who suffered a very painful and stressful death. My memories of her death haunt me to this day.</p> <p>I have also seen two of my uncles suffer similar death experiences in end of life facilities in the UK.</p> <p>People are desperately failed in the current system. Let each individual make a decision as to what is right for them.</p>	Not Answered	<p>Q19 Assumes that the person is able to still be able to write to sign the Assisted Dying Document. This will probably not be the case for a number of people, in addition, fear of this happening could hasten a person into an early signature.</p> <p>Q20 I believe it would be better for society if people came to regard writing a 'Living Will' or 'Medical Directive' to be as important as other wills concerning say property & money. This Medical Directive could be written at any time from 18 years of age. It could be changed or amended throughout a persons life - just like any other will. The Medical Directive could cover key aspects of when assisted dying should apply. For example, a person left on life support, following on from an accident/illness/infection could state (from a pre-prepared tick list) whether given certain circumstances they would wish their life support to be switched off. This would ensure that their own wishes were met, and avoid the tragedy of court battles which currently can happen in cases where, for example, the health service and a persons family disagree.</p>
Disagree	<p>Its against my religious beliefs</p>	Other	<p>The Island should not become another option for people to come to for to end their lives in a business/corporate set-up</p> <p>I think that nature should take it's course rather than medical professionals intervening and speeding up people's deaths.</p> <p>Counselling is a better way forward and support in the Community for families and more measures in the workplace to enhance all the loving care that can be provided for persons at their end of life. Life is precious and hope is there until the last breath.</p>
Disagree	<p>There are many risks of assisted dying</p> <p>Coercion - either implicit or felt by the person - that they feel a burden and feel an assisted death would be preferable</p> <p>In other legislations the criteria have changed over time with increased use of assisted dying and for other reasons eg in Belgium for psychiatric illness. This is a real risk</p> <p>It establishes that death is preferable to living - and reduces reasons to look at how to help the person live and improve their quality of life</p> <p>There are risks that an assisted death becomes normalised - in Canada the number of deaths has increased dramatically over the years</p> <p>Palliative care may be affected and the need to develop palliative care, particularly for non-malignant disease may be reduced</p> <p>I have seen families grow together and share together over the last few days of a person's life - while they are less responsive but pain and distress free. If an assisted death took place earlier, they would lose these opportunities</p>	Not Answered	<p>Assisted dying will change the care of people - until palliative care is widely and freely available for all people - regardless of diagnosis and prognosis - with increased palliative care education for all health and social care professionals, and health and social care are readily, and freely available, without delay to all people there should be no change in the law.</p>
Agree	<p>It should be a fundamental human right.</p>	Not Answered	

Agree	I think assisted dying should be allowed but only with the right safety mechanisms in place	Not Answered		Many people living with cancer can still lead fulfilling lives and if the correct palliative care is carried out they should die a pain free and peaceful death. However, conditions like MND, MS and Parkinsons can leave victims unable to live independent lives and in some cases strips them of any dignity and their standard of living is seriously curtailed. In these cases, I fully support assisted dying, provided the correct safeguards are in place.
Disagree		Not Answered		I disagree with the whole principle of assisted suicide and that should be better provision for terminal care instead. There is potential for this to discriminate against certain groups of people -those with chronic health conditions, the elderly and the disabled. There is potential for these people be put infer pressure due to financial reasons to end their lives prematurely.
Agree	Why make the person suffer, it is inhumane an animal would be put to sleep.	For over 5 years		
Agree	I think that all human beings deserve the right to call an end to an unbearable illness or condition if you can do it for an animal, why should a competent adult human not have the choice people can commit suicide but that is less than kind or dignified - for the person in question but even more so, for their relatives - especially their children.	Not Answered		
Agree	I believe in personal choice, personal decisions in all aspects of life.	Other	This could become an industry in the IOM at a time when we have reducing revenue streams and increasing costs of civil servants / government	I believe people should always have choice in respect of their own live. This does of course include doctors if they do not wish to administer assisted death medication or otherwise assist in the death. I am sure there are plenty of doctors who will accommodate this. I also wholeheartedly disagree with a religious arguments in this debate. Religious people are free to follow the doctrine of their choice, but they are not free to impose those doctrines on others. If there is any debate to be had on this subject, and any question of whether or not it should be allowed, I believe it is important enough to go to a referendum. As much as I do not like the idea of the wrong decisions being made in a democracy, or indeed the wrong or bad decision being made by the IOM cabinet, I would be happy to follow the herd's decision in this case, then I can decide if I want to stay in a society that, despite talking a good talk is not forward looking or progressive, hence exercising my right of choice.
Agree	My father would have preferred assisted dying to the unsatisfactory palliative care process. My mother lived for nearly 10 years in a mental state which involved no recognition of herself or others and would certainly have preferred to opt for assistive dying.	For over 1 year		I strongly support being able to opt for assisted dying in advance of becoming mentally incompetent. My mother became mentally incompetent and remained so for a number of years, but would certainly have opted for assisted dying rather than remain in that state - and expressed that preference before her decline.
Agree	It's a matter of personal choice and freedom. The safeguards described within the proposal, along with the existing support provision, give confidence this would not lead to misuse.	Not Answered		

Agree	Palliative care for terminally ill adults should account for individuals wishes including their end of life decisions. My husband and I cared for my in laws in their final months, weeks and days and we would willing do it again. However, I feel it is inhumane to allow such suffering at end of life when assisted dying was an option that was not available. I fully believe they would have considered and chosen assisted dying had they been able to. Assisted dying would have also maintained their dignity in the last days of their life.	Not Answered	As a man resident someone who cared for a loved one in our IOM home who was not resident. I have concerns others may be excluded on residency grounds.	Question 19. There would need to be provision for individuals who are unable to sign to give consent. For example if they have a degenerative disorder or other physical impairment.
Agree		Not Answered		
Agree	Everyone should have the right to die as they so choose.	For over 5 years		
Agree	I believe that it is inhumane for terminally ill patients to suffer the pain and indignity that often accompanies their final moments. I also believe it is inhumane for their loved ones to witness unnecessary suffering (physical and mental) in the event that the terminally ill adult wishes to have a swift, predictable and painless end to their suffering. I strongly believe that sufficient processes can be implemented to ensure that ability to offer this kindness can be given without compromising the safety of vulnerable persons.	Not Answered		I am uncomfortable with the person or relative being able to hold drugs at their home until the person wishes to take the drugs. I strongly believe that the person should have the ability to pass away at home, surrounded by their loved ones if they wish, but I believe that drugs should be held by and administered by a healthcare professional at that persons home. This is to ensure that the person had not changed their mind and then was being forced into the action by a third party. I understand that this would potentially be a drain on our already stretched medical professionals, but I feel it would be the "gold standard" of assisted dying. I have first hand experience of watching a dear friend die slowly and painfully, and whilst the IOM hospice and hospital team did their very best to make her comfortable, she begged to be put to sleep to end her suffering. It was inhumane and unbearable for her and her loved ones (and I believe those professionals caring for her).
Agree	IT IS AN EXPRESSION OF FREE WILL	Not Answered		FREEDOM OF CHOICE SHOULD BE PARAMOUNT
Agree	I personally would prefer some autonomy and dignity at the end of my life. We all only have an allotted length of life and I would wish to remain independent for as long as possible, if it came about that I had a terminal illness which would diminish my independence and capabilities I would consider my enjoyment of living at an end.	Not Answered		
Agree	People need to have their own choice. For some people the pain and suffering are prolonged and this is not living.	For over 1 year		I think a healthcare professional/s should be with the person when taking the medication. I'm not sure whether a person should be able to pick up the medication and take it home to use - I feel there should be more rules involving when and where to take the medication eg and special clinic or at home, the health care professional/s brings it with them on the day.
Disagree	I don't think anyone has the right to terminate al life prematurely.	For over 5 years		

Disagree	As a Christian, I strongly disagree with assisted dying. It is totally against Christian ethics and a violation of Scriptural principles. It flies in the face of God and is open to abuse on every level. I completely agree with each point which has been published by Manx Duty of Care in their brochure, presenting the case against assisted dying in such a clear, informative and comprehensive manner.	Not Answered	
Disagree	I don't believe that we, as a society are in any position to contemplate such a process. In supposed "health care" situations there will be an increased danger of abuse, normalising of suicide [just as we have normalised abortion]. There will be pressure to do the right thing on relatives & medical staff. Increased suicide risk due to depression and it will be a risk to disabled people. As a society, we are not above stretching the law to get our own way. The diagnosis of terminal illness is imprecise and our relationship with the medical profession will be damaged. There will always be a medical alternative to this proposal.	Not Answered	
Agree	<p>I have experience of those with terminal illness but with clarity of mind, and the safeguards proposed are strong and I support them. Two family members are professionals within the medical field and hold the same views.</p> <p>Any ethical philosophy for human life must have a thought-through approach to deal with death.</p> <p>There are sincere arguments on all sides, but the final determinant (within the limits of safeguards) must be the wishes of individual whose life it is - NOT a government or regulatory body acting with an overriding power of veto.</p> <p>Most individuals continue to the end without assistance on the final stage, but there is a minority of cases where quality of life is so appalling and painful that it is manifestly selfish to deliberately extend life in conditions of total misery, against the individual's wishes.</p> <p>We can and must trust individuals to exercise judgement and resist the temptation to yield to the misguided claims that one group within society knows better.</p>	Not Answered	<p>Under point 19 - this should be a recommended practice - but an alternative written document - such as within a will or letter or other statement witnessed by two other people, one of whom should be a lawyer, doctor or health professional, should also be acceptable evidence of the individual's wishes.</p>
Agree	I would not wish to prolong my existence if I had no or very poor quality of life	Not Answered	
Agree	<p>So I would have the choice to face inevitable death on my own terms rather than experiencing possible enforced suffering.</p> <p>Having the choice takes the fear away of how life might end.</p> <p>Quality of life matters, not existence at all costs.</p> <p>I don't want someone else's opinions preventing me from having an option.</p>	For over 1 year	<p>The precise details should be talked about in some sort of citizens assembly.</p> <p>I am not happy that a religious organisation has delivered leaflets against assisted dying which are misleading. The leaflet does not make it clear who has written the leaflet and try's to make it look like Manx Care publication.</p>
Agree	a person should be allowed to die with dignity, and not suffer years of pain and anguish . this not only allows the person to die and alleviate their pain , but relieves the nearest and dearest friends and relatives of the suffering that they feel in watching someone slowly die	For over 5 years	<p>we allow animals to die with dignity before their pain becomes unbearable, surely we can extend that right to a human being. whilst life is precious, so is life without pain</p>

Agree	<p>Yes. As long as the individual is clear and coherent that this is what they truly want.</p> <p>I watched my grandad suffer greatly in his final weeks of life with lung cancer which had spread throughout his body. He was truly exhausted, defeated and mentally/emotionally depleted from the shock of finding out he didn't have much time left (he passed away within 6-8months of finding out he had cancer). I will never forget how much pain he looked as though he was in during those final days (he verbally told us too) and he was a VERY strong man. Therefore, if he had a choice to pass peacefully and by his own choice, I wholeheartedly believe it truly would have been the kindest and most peaceful thing to do.</p>	Not Answered	<p>Plainly, I do support the bill but ONLY if there truly truly truly are measures put in place to make certain that the individual is mentally sound and has not been manipulated into believing that they are 'annoying' or a 'burden' to others.</p> <p>I imagine that if the bill passes, many vulnerable/elderly people (as our elderly population is so high) will be in a situation where their body's are failing and they can choose to end their lives. I would hate to think that they are being pressured into this by greedy/abusive family members or 'friends'.</p> <p>Bottom line, I believe we should have 100% control over our own bodies and deserve a choice if one day we are in such a difficult circumstance.</p>
Disagree	<p>It is only by having laws that clearly state that one person should not kill another- or assist another to kill themselves that vulnerable people can hope to be protected. Even with these laws some people chose to kill other people, or encourage others to kill themselves. Once these laws are "relaxed" in any way, then the value of human life will start to be eroded and more people will be vulnerable to being killed - whether they want this or not. This has happened in The Netherlands, Canada, Oregon and is happening in New Zealand.</p> <p>Allowing assisted suicide may reduce the suffering of a few, but it will risk the lives of many. We should look to relieve individuals suffering but not at this cost.</p> <p>The only safe ethical position for society is that all human life is of value. If some people find their life a burden we should look for ways of reducing this- but not by agreeing with them that their life has no more value. Once we start to make judgements about whose life is worthwhile it is a short step to potentially fatal discrimination against many minority groups (those with physical disability, those with mental illness, those who cannot afford care). This has been clearly illustrated in those countries who have allowed assisted suicide- it has soon led to euthanasia.</p> <p>There is a caring motivation for some requesting this change- but evidence is that this will not create a more caring society. I</p> <p>Instead of wasting resources on new legislation, in order to allow your citizens to kill themselves please invest in palliative, mental health and social care - so that the suffering can be reduced.</p>	Other	<p>I do not believe this legislation should be passed at all</p> <p>I do not believe it is possible to introduce any legislation allowing assisted suicide that will adequately protect the vulnerable from coercion and abuse. While I deeply sympathise with those who are finding their lives a burden and wish to end them, I strongly believe that by supporting them to do this, the overall effect on society - and particularly vulnerable groups in society - will be detrimental. Countries which have legalised this have seen a gradual widening of legislation to allow assisted suicide for more and more groups, to allow euthanasia. Those who are poor and vulnerable are particularly at risk.</p> <p>If the legislation goes ahead, I would strongly advocate for as many checks and balances as possible, and a process to be put in place to defend against widening of criteria in order to protect the poor and vulnerable in our society.</p> <p>However, I would instead request the money is spent to make people's lives more worth living i.e. palliative care, mental health care,</p>
Agree	Acceptably introduced in very many large and more sophisticated countries, and have personally witnessed alternative "liverpool pathway" at hospice in IOM and found it lacked warmth	For over 1 year	Taking medication must be by positive action of patient at the time of administration; if incapacitated and unable to act, current protocols to apply.
Agree	The decision to die is a basic human right. To do so in the comfort of your own home with your loved ones around you is the kindest way to end a terminal illness. To have to endure such an illness when it could be avoided is surely in everyone's interest.	For over 5 years	

Agree	The reason for my response is simply selfish in that right now I can give my pets more dignity and avoid further suffering to them than I can give myself	Other	I think this should be an option for all people	I think the current system is insane as I said earlier I can put my pets to sleep if they're suffering to avoid them further pain yet I cannot make this same decision for myself? My wife and I have discussed it and we both know in event of either of us for example being kept alive by machines is no life so I've already said switch it off that's not living ! To force people to suffer because the law says so makes the law an ass
Disagree	The law Is unnecessary and dangerous. You kill pain, not the patient. Assisted suicide laws put pressure on our patients: The right to die can easily become the duty to die.	Not Answered		We must be very careful about this, and I am most emphatically not in favour of changing the law on "assisted dying". Without suggesting that anyone I know would abuse any change, I can think of circumstances where others, including financially constrained health-care professionals/administrators, or unscrupulous relatives awaiting inheritance, might. Much more research and development of palliative care, (despite the expense involved), is the way forward in my opinion. The phrase, "thin end of the wedge" also springs to mind. There is a slippery slope that begins with legalization.. To legislate that the life of a particular person with terminal illness is disposable subtly diminishes the protection accorded to other lives. When a patient says, "Help me, doctor," he is assuming that his doctor is on the side of his life. Doctors need to have a degree of humility and remember their Hippocratic Oath, that they should use no medications to cause death even when asked. Euthanasia kills the patient twice – once when we say, "Yes, your life is not worth living," and then when we help him die. The law Is unnecessary and dangerous. You kill pain, not the patient. Assisted suicide laws put pressure on our patients: The right to die can easily become the duty to die.
Disagree	I believe this survey is deeply flawed any answers to questions beyond this one implies tacit approval with the principle of assisted dying. The survey should be withdrawn and any subsequent one professionally designed and analysed	Not Answered		We are unwilling to answer question 7 to 28 as the questions concern the process and by answering them the principle is endorsed. Careful study of the experience of other countries should be undertaken where there are examples of things going disastrously wrong, especially the Netherlands and Canada. There is no safe way of drafting legislation to cover every situation there will always be vulnerable people who are coerced or taken advantage of. It is entirely unreasonable to ask medical professionals to be involved in this process there time is better spent providing palliative care. The Isle of Man criminal law act 1981 states it is illegal to aid suicide. The act is correct and should remain

Agree	Despite advances in palliative care this is not always available to everyone. People should be given the right to a dignified death.	For over 1 year		<p>If the draft Bill completes its course through HOK and is given Royal Assent then it is imperative that the medical profession takes this forward and acts on the wishes of the people. They must Not refuse to give the treatment as they have done with abortions despite this procedure being legal.</p> <p>Circumstances in which the patient is unable physically to sign a document should be considered and a solution provided that will enable them to communicate and record their wishes in some other way</p>
Agree	I have cared for terminally ill & catastrophically disabled adults and every one of them has been in more distress at having been forced to endure the pain and perceived indignity of their situation and had they been physically able they would have ended their own lives	Other	Dependant on circumstances	
Agree	Making people suffer who don't want to be here is absolutely barbaric. Cruel and unusual punishment - by definition.	Not Answered		
Agree	It is cruel to make humans suffer until natural death. We would show mercy to a suffering animal and yet we deny this mercy to our fellow humans. And no matter what doctors say about pain relief, people who have terminal illnesses suffer dreadfully. There is also the knowledge of the soon to happen inevitability of death: better to get it over with. Lastly, there is the suffering of one's loved ones, watching and trying to cope, that one is forced to witness to the end.	For over 1 year		<p>We are faced with the dreadful implications of Alzheimers. A person should be able to say in advance, whilst of sound mind, that past a certain specified point of mental or physical deterioration they will be 'put to sleep'.</p> <p>It cannot be that people who pass the point of being deemed mentally competent must then suffer to the dreadful end.</p>
Agree	I believe a person should have the right to terminate their life through voluntary euthanasia in circumstances where they have a terminal illness or incurable pain.	Other	I think in order to avoid "Assisted Dying Tourism" there should be a qualifying period but that this should be three years.	<p>In Question 9 in response to whether I think that there should be a limit on their life expectancy, I answered "longer". There was no option to answer "No". There should not be a limit on life expectancy. This is because:</p> <p>a) it might be difficult to assess with any degree of accuracy the life expectancy and a medical professional might be reluctant to provide a time estimate because it would take the person within or outside any relatively short date range for Assisted Dying. I believe that provided the illness is terminal this should be sufficient.</p> <p>b) the terminal illness might be a mental illness, such as Alzheimer disease where the life expectancy could and often will, be longer than 12 months; and</p> <p>c) I agree with the introduction in question 10 for the provision of assisted dying for someone who has a condition which causes unbearable suffering that cannot be alleviated by other means but which may not give a terminal diagnosis.</p> <p>With regard to Assisted Dying for someone who has a mental illness, as from 17 March 2023, under Canadian legislation, Assisted Dying will be permitted for persons who have a serious and incurable illness, disease or disability including a mental illness.</p> <p>A report of Dementia Australia provides some useful legal framework on the use of Assisted Dying for persons with a mental illness: https://www.dementia.org.au/sites/default/files/2020-12/Dementia-Australia-submission-QLD-VAD-legal-framework.pdf</p>

Agree	People have the right to make the decision if they live or die. Assisted dying will ensure they die quickly and painlessly. It also gives the family reassurance that they did not suffer. It can also prevent the trauma of someone finding a suicide.	For over 5 years	Mental illnesses, illnesses that cause a lot of pain should also be included.
Agree	I have watched loved ones die in the cruellest way by being forced to live when they did want to suffer any longer. Given that assisted dying is administered by so many other countries, I do not think the arguments against it are valid. No-one would be forced to request it and checks and balances would prevent only one person taking the decision.	Not Answered	
Disagree	<p>Everyone's life is valuable. The reason's for someone wanting to take their life may due to depression which is treatable or because they are worried about being burden on family or the NHS. A family member may convince someone that they should seek assisted dying but that person may not be aware that there is an alternative such as pain management. I think the island should concentrate on enhancing the excellent work carried out by the Hospice.</p> <p>A doctor's role is to preserve life not take it away. It is possible that a doctor may be wrong in determining how long someone has to live. Even if another doctor provides a second opinion he/she could be influenced by the other.</p> <p>More funding should be provided to Hospice to ensure that everyone on the island receives excellent palliative care when needed.</p>	For over 5 years	I don't think the island is ready for this. I also think we need to avoid any prospect of becoming a place to go to for such a procedure like Dignitas in Switzerland.
Disagree	Isle of Man has excellent palliative care provided by the Hospice. Not everyone benefits from it but if this service was to be provided to everyone who faces end of life issues, I believe that there would not be a need for Assisted Dying.	For over 5 years	<p>I do not support the Assisted Dying Bill. I believe that more investment should be made into provision of palliative care. I also believe that if the person's suffering cannot be alleviated, the doctors should be allowed (with patients' agreement) to increase pain control to the level that may hasten death but not cause it.</p> <p>I believe that post Shipman's era, there is a reluctance and fear among medical and nursing professions to prescribe higher doses of medication to stop the suffering.</p> <p>There is also a scope to be brave and use other substances (e.g medicinal cannabis) to reduce and control symptoms as well as an opportunity to increase other measures that help such as psychological interventions, social support, therapeutic art and address the financial pain often associated with terminal illness.</p>

Disagree		Not Answered	<p>The whole process as described is far too easy and open to abuse. I couldn't answer most of the questions above because the options do not clearly indicate in which way one objects. Answering NO to any of the above could indicate that I think the suggestion is too lenient or too harsh and I did not want to answer in a way that could be used to mis-represent my views.</p> <p>The 'Not sure' option is not suitable because I am sure of my opinion.</p> <p>Your form just does not allow that option to be expressed.</p> <p>This does not feel like a consultation but a rubber stamping of decision that somebody has already made.</p>
Agree	People should have the right to choose how and when they die if they have a life limiting disease or condition. We should be allowed to die with dignity and not wasting away full of meds with Drs and Consultants dictating what happens to us and trying to keep us alive when we don't want to be anymore.	For over 5 years	
Agree		Not Answered	
Agree	Terminal illnesses can be terrifying and painful for the patient and distressing for relatives. My wife and I have had to stand by and witness loved ones, lose their dignity and wither away over long periods often in pain despite wonderful pain. Each of our parents died this way, over an extended period, each having full cognition wanting not to end their lives this way, not wanting this to be their defining memory for themselves and loved ones. I remember my mothers words: "I cant do this anymore, cant you find a way to let me go in peace". Heartbroken I could not. My wife and I have explicit living wills, defining levels of incapacity at which we wish to die. Hers engages sooner, but she has MS... We have promised each other to abide by these wishes, wherever in the world we need to go for it to be legal. Please let it be here!	Not Answered	<p>* The stated process works for a patient who is deemed fully competent. Each doctor should discuss the option of assisted dying separately and alone with the patient. Where a patient lacks competency and/or may be open to persuasion by vested interests, then a living will from when they were competent should suffice.</p> <p>* Each doctor must fully agree</p> <p>* Living wills should be discussed with and registered with the patient's GP.</p> <p>* In the absence of competency and a living will, the two doctors should submit the case to the Medical Director or a special board</p>
Agree		Not Answered	

Agree	<p>I HAVE, (FOR THE SECOND TIME), KIDNEY CANCER, HAVING HAD MY RIGHT KIDNEY AND MANY GLANDS REMOVED IN 2008, SO I HAVE LIVED WITH CANCER NOW FOR FOURTEEN YEARS!.</p> <p>IN JULY 2019 I WAS DIAGNOSED WITH STAGE FOUR CANCER IN MY LEFT KIDNEY, WHICH IS OF COURSE THE MODERN AND BETTER TERM FOR "TERMINAL"</p> <p>THE MANX NHS FALL WAY SHORT OF ACCEPTABLE TREATMENT I/E ACCESS TO ONCOLOGY SERVICE BY APPOINTMENT ONLY!!! (not a drop in centre), WE CAN'T ORDER SEVERE PAIN ONLY TO SUIT PRE- ARRANGED APPOINTMENTS!. THE ONLY DEPT. AT NOBLES HOSP. AVAILABLE TO US IS A AND E, AT RECEPTION EACH TIME WE ENTER WE ARE ASKED WHY HAVE YOU COME HERE?, YOUR NEITHER AN ACCIDENT NOR AN EMERGENCY!. (NO! WE ARE JUST DYING AND IN UN BAIRABLE PAIN! WE SAY. STAFF OFTEN SAY," THE GOV. CAN'T AFFORD BETTER FACILITIES. IF THAT IS SO, THE ONLY ALTERNATIVE,(and cheap) IS SURELY ASSISTED SUICIDE. THE PROBLEM FOR ME PERSONALY IS I ALTERNATE BETWEEN ABSOLUTELY UNBAIRABLE SUFFERING AND JUST DREADFULL PAIN!, SO I CONTINUALLY RE-CONSIDER MY PERSONAL SITUATION (it's always difficult) day by day!. THIS IS MY PERSONAL SITUATION, BUT I HOPE IT HELPS THOSE WHO READ IT UNDERSTANDS THE PRESENT TERRIBLE SITUATION CANCER PATIENTS ARE IN. THE ANSWER!, 24 HOUR COVER FOR PAIN CONTROL OR ASSISTED DYING, THE LATTER WOULD BE MUCH CHEAPER, SO THAT IS THE WAY POLITICIANS WILL GO I AM SURE AND I WILL AGREE,(when i am in agony at 0400 hrs and violently sick!</p>	Other	should be pemanent residents	<p>I AM SORRY BUT, FROM MY POINT OF VIEW AND MY SITUATION I FIND SOME OF THE LATER QUESTIONS ARE IRRELEVANT AND REALLY QUIET SILLY!!</p> <p>MR ROLAND NOBLE 32 MYLCHREEST COURT DOUGLAS ROAD PEEL IM51LD</p>
Disagree	<p>As a practising GP, I feel it is entirely unethical to permit assisted dying as a treatment option to any patient. This goes against everything that I work for. Resources should be put into improving access to excellent palliative care rather than improving access to euthanasia. I do not think there can ever be adequate safeguards against coercion of vulnerable individuals. Euthanasia devalues the intrinsic worth of an individual and fear of being a burden is a significant factor in those considering euthanasia.</p>	For over 5 years		

Disagree	<p>My wife committed suicide. This was far more traumatic to her immediate family than death by natural causes. She had chosen to leave us all behind in 1992 and our children still have not come to terms with that. We must not normalise the suicide process.</p> <p>Likewise we should not introduce the concept of expected dying which would invariably invoke concepts of convenience and put the chronically sick and vulnerable personalities at risk of others' expectations. For this one reason alone, assisted dying should not be legalised. Terminal illness is not a precise diagnosis and to predict someone's life expectancy is little more than guesswork. I have been a doctor for 48 years, frequently dealing with terminal care and this observation is based on real-life experience. I have known patients on a "DS1500" live for many years.</p> <p>If the IOM were to become known as a centre for assisted dying, it would not be long before residents of our neighbouring island travelled here for just that purpose. Rather like Switzerland where assisted suicide has been legal since 1942 and where the Dignitas clinic opened in 1998, the country has become more known for assisted dying than for its other attributes. Many Swiss residents remain uncomfortable with that connotation.</p> <p>"Unbearable" suffering can always be treated if properly addressed.</p>	Not Answered	<p>The above questions are not answerable by someone who does not agree that assisted dying should be legalised at all</p>	<p>The concept outlined by the above questions is frankly hideous. The questions imply agreement and should never be allowed in a properly-prepared public census. Would we REALLY consider a next of kin, or friend, collecting a lethal dose or oral medication from a pharmacy (heaven help us if it is the current IOM pharmaceutical setup involving a well-known chain) and then wander around with it whilst they did the rest of their shopping? Would we REALLY like such a lethal cocktail to be stored in the patients' houses? In a bedside locker, perhaps? The Controlled Drug regulations followed by doctors and pharmacists are stringent indeed for good reason. What if the patient changes their minds? 7 days, 14 days? Should there be a health care professional present throughout or will Uncle Tom do?</p> <p>This process has not been thought through at all and is nowhere near the stage of going out to public consultation.</p>
Agree	<p>I think everyone should have the right to chose when they die. People with terminal illness and severe mental illnesses are in insufferable pain 24/7 and they should be able to die without the tragedy of a typical suicide.</p>	Not Answered		
Disagree	<p>Assisted dying should not be allowed. It is against the laws of God. It goes against the Coronation Oath Act.</p>	Not Answered		
Disagree	<p>Please note my response to the below questions that follow is 'not applicable' as I am against assisted dying.</p>	Other	<p>These are badly formulated questions</p>	
Disagree		For over 5 years		
Not Sure	<p>The best approach is to have a high dose of morphine or other pain relief. This approach means that treatment is available to people whose religion is against deliberate killing. This is called the doctrine of double effect as the aim is to provide pain relief and the death is a foreseen side effect and avoids all the moral dilemmas of barbiturates which have no therapeutic value.</p>	Other	<p>No time limit. Once someone is resident or domiciled here they should be covered</p>	<p>Qu 17. Many doctors are trained in capacity assessments, including gerritricians.</p>
Agree	<p>I do not believe that someone who is terminally ill should be forced to live in pain, distress or fear. It is inhumane and selfish.</p>	Not Answered		

Disagree	<p>There is no way to know the real reasons why someone wants assisted dying and it is open to too much abuse. People who are ill are vulnerable and open to suggestions by relatives and friends who want it all to be over so they can get on with their own lives.</p>	For over 1 year	<p>The health service on the island is under enough pressure already without hiring specialist staff to deal with this. We all like to feel that we are the ones in control but aren't at all. If couples want IVF treatment I think it is reasonable for them to pay for this. If they can't afford it they won't be able to afford the cost of raising a child. If you do decide to go for some form of assisted dying I feel the patient and family should pay. We need to use our limited resources to help people to live not die</p>
Agree	<p>For me, it's all about quality of life. And, once a human is reduced to being wholly dependent on family and/or health services, what is really the point of living? If I were in such a position, I would hate to be the one making life a misery for my loved ones and prolonging their agony. But, under current law, I could not ask them to help me put an end to this without making them culpable.</p> <p>At the moment, there is no way out of this conundrum, so I would welcome a change in the law so that a legally acceptable escape route becomes possible.</p>	For over 5 years	<p>Personally, I would wish the option to be extended beyond diagnosis of a terminal condition. For me, being "put in a home" is in itself a terminal condition and I have no desire ever to be in that position.</p> <p>That prospect to me is, if anything, worse than having a terminal illness. I feel that, with an over-populated planet and a healthcare system that is wholly inadequate to give a worthwhile quality of life to the elderly, society has to face up to the problem that the cost of supporting an ever-ageing population is simply not sustainable.</p>
Agree		Not Answered	
Agree	<p>It is a personal choice for everyone.</p>	Not Answered	<p>I am also in favour of the IOM providing this choice to non-IOM residents, as an alternative to travelling to an EU country, eg Switzerland.</p>
Disagree	<p>As a retired nurse I have seen much suffering which has coloured my thoughts against this practice.</p> <p>There is a spiritual side to this problem as well as an ethical one. I appreciate other views, however I think it is wrong to ask professionals to assist dying, although I realise there are many who would agree to do it, and have done without saying in the past, some unwillingly.</p> <p>Like aborting babies who may have Downs syndrome it is considered by many to be a form of murder.</p> <p>One should do all possible to alleviate suffering with pain control and devices/care to make life comfortable for patients. I realise/believe there is already a form of euthanasia in the system not acknowledged.</p>	Not Answered	<p>Not really as I disagree with any bill of this type.</p>

Disagree	We have excellent palliative care on the Island and there is no need for this. I feel it is dangerous because it would not offer protection to vulnerable people. Firstly because many elderly feel guilty about the cost of their care in residential/nursing homes and might feel that, for financial reasons, they should request this. Secondly many people have periods of depression and might well consider this when they are down but feel quite differently sometime later. Once the right is given to some people to choose death why shouldn't others? I also think it will be difficult to get health professionals to work here if this is in place. As a person whose family has lived on the island for hundreds and hundreds of years I feel ashamed of the island for even considering this. Instead I would like increased support for the Hospice.	Not Answered	All these questions presuppose the first answer was yes, so most are a nonsense. Question 9: As I understand it life expectancy is not an exact science and the public should not be led to believe that it is. Question 11: Euthanasia was not authorised by the Keys to be explored. Question 14: any residence requiremnt might attract people to the Island and thus impose an extra burden of care on the health services, but if there is none we will become the death tourism capital of Europe. Question 16: I would include administrative staff in any conscience clause. Health professionals shouldn't be at all involved. If it happens at all this should be a legal process with an executioner.
Agree	If our quality of life is compromised and we suffer the indignity of a terminal illness and can no longer live as independent we should not be forced to exist by others beliefs, but be measured by our own intelligence for our wishes to be listened to.	For over 5 years	A vet is able to offer advise that someone's beloved pet if suffering and has no quality of life left and the owner then makes the final call, we offer this to animals and not humans!
Agree	People should be able to make their own decision on dying. Animals can be put down and they can't give their consent	For over 1 year	
Disagree	Experience shows safeguards and standards slide. Time should be devoted to improving end of life care. Definitions of disability change.	Not Answered	You cannot tell from this process what the majority of people on IOM think.
Agree	People who have made a reasoned choice not to continue living should be able to do so, rather than feel forced to continue suffering for years or even decades because of what is effectively a sick medical experiment by egotistic doctors.	Other	Generally over 5 years would be correct, but this creates problems when people who are effectively Manx leave for work purposes then come back but have not been back 5 years to the day, so should be some leeway. Whether or not the government passes this useful bill it urgently needs to address the fact that there is no real palliative or end-of-life care on the Isle of Man, and now even people with Alzheimers-related conditions will suffer the dubious care of superstitious half-wits. The present system set up by government is totally unfit for purpose, and in reality anyone with a three figure IQ must choose to make their own arrangements as to how they spend their last days. As long as what is currently laughingly described as "palliative care" on this island is the monopoly of the Hospice movement terminally ill competent adults are at the mercy of what is effectively a god-bothering cult, even when they do not wish to end their lives. This sick cult cannot be allowed to continue interfering with the lives of competent adults who are not fooled by superstition-wracked control freaks and their publicly funded drivel. Their monopoly has to end, and the government has to transfer responsibility for end-of-life care to fully trained, rational professionals.
Agree	If a person is terminally ill they should be able to take their own life in a dignified way and they should have the choice to make their own decisions.	Not Answered	A person should be allowed to choose how to end their lives if they are mentally able to do so, when they no longer have the quality of life they want, because there are no health care provisions, you can't always get into a hospice, and there is no dignity in lying in a hospital bed, and death is inevitable.

Not Sure	<p>My dear husband passed away april 2021 after having Dementia from 2015. His last 18 months being 9 months in a care home and final 9 months in bed in a nursing home. His dignity was taken from him whilst he was at home requiring 24 hr care. He was unable to swallow liquids for some considerable time. No one should have to endure what he went through. Of course we do not know if he was suffering pain or anything else as he was unable to speak for months. Reading through the literature available regarding assisted dying there is no mention of Dementia Patients</p>	Not Answered	
Disagree	<p>A proposed bill is not going to solve deficits in care, but it may result in people not being offered the care that they need at the end of life. Inadequate integration of palliative care with acute services leaves many patients unable to benefit from modern techniques - such as palliative radiotherapy and surgical – which could benefit them. Advanced pain management techniques such as nerve blocks are also underutilised. Diverting resources away from these areas to involve staff in processing eligibility and providing lethal drugs will only worsen this situation. The evidence in jurisdictions where assisted suicide and euthanasia has been in place for some time, such as the Benelux countries, reveals that many doctors have changed their minds and become critical of the reality of implementation. Doctors have reported a major emotional toll from such involvement. The British Isles already has a workforce that is exhausted and demoralised; it does not have capacity or resilience to take on additional complex legal responsibilities to end life when all efforts during the pandemic have been to enhance and protect quality of life, while accepting the inevitability of death. Any ‘in principle’ notion of assisted dying cannot progress without workable safeguards and a detailed process to ensure the practicability of an assisted dying law. It is our concern that no sufficient level of safeguarding can be achieved to make an assisted dying law workable, and that the ‘in principle’ assisted dying proposition has been based on inadequate consideration of the factual evidence that points to the inherent dangers of the proposal, which is both redundant and dangerous. Moreover, no concrete and specific proposals have been laid out, and it is therefore impossible to scrutinise in a way that would ensure proper safeguarding.</p>	Other	<p>Assisted Dying should not be legal in the Isle of Man, but if it were to be legalised, patients should be permanent resident's for over 5 year's, and they should have been treated on island for all their illnesses within the last 5 years.</p> <ul style="list-style-type: none">•Many of the questions laid out are leading and do not allow for nuanced response. They overlook the fundamental question a whether the population of the Isle of Man would be safer if the law remained as it is or whether they would be safer if assisted suicide and euthanasia was introduced.•The survey focuses on the qualifying conditions for being provided with lethal drugs. For example, question 9, concerning life expectancy, is a closed question. The reality is that prognostication is extremely inaccurate and the error around a guess at 6 months can extend to years (see HL 86-l). The failure to recognise the errors in prognosis proscribes sufficient scrutiny and has led to poorly drafted legislation in other jurisdictions.•On a small island with a population of only 85,000, complete independence between doctors will be difficult – or impossible – to maintain. Where assessments conflict, a specialist in the disease of the person should undertake an assessment, and should be recruited from off-island if necessary, in order to exclude misdiagnoses, which occurs in 5% of patients who are thought to be dying (RCPath evidence to the House of Lords).•Given the shortage of medical staff across the British Isles, there is a great risk that an assisted dying “service” will divert resource away from the life-saving and life-improving treatments and activities of the health service, in favour of procuring death. This conflicts with the aims and objectives of the health service to provide care and support. <p>I think all people want is an ending to their suffering, who find themselves in a miserable, painful existence which can go on and on, leaving them with no dignity. We put animals to sleep as we are compassionate owners and want to end their suffering but as a nation we don’t offer human beings the same peaceful, dignified and compassionate ending.</p>
Agree	<p>I do not believe the state should have any say about my body and how my life will end.</p>	Not Answered	

Disagree	I saw what happened in the Netherlands when the law passed. A slaughter. Shocking. A person close to me was depressed after losing a baby. She wanted to due. As long as she had relatives agreeing it would go through. They did not have the funds to pay for counseling. They died. Every life is precious to God. One command us to not kill. If you follow commandments it will go well with you. There are too many unbelievers who think they know purpose in everything. God gives the heart beat and takes it away.	Not Answered	No assisted suicides	Any of the questions force a person to answer about assisted suicide. There should also be a box that indicates I do not agree. I saw a video of Bill Gates advocating this and his reason being that these people were a drain on society. It's interesting that covid also killed off many elderly. I saw first hand how that door was opened with promises that were altered without public conscent or awareness.
Agree	Having already experienced the emotional upset that is caused by the lack of assisted dying available, I wholeheartedly agree - given that certain conditions are put in place.	For over 5 years		The person concerned should always have a decision relevant to themselves. Too many times, the person/patient is treated like a second class citizen, by their wishes being ignored. Surely in this informed age, we should all have the opportunity to decide - in not doing, I believe, human rights are refused and diversity (yes, diversity - the person dying is part of an alternative group and should therefore be considered as diverse) is being ignored.
Agree	Simply sustaining life is not enough quality of life is essential.	For over 1 year		The relevant medication should be administered by a Health Care Professional
Agree	I believe if an adult is terminally ill and in pain, you should have the right to take the decision to have your life terminated. There must however, be robust rules to protect the individual against those who might act against the patient's best interests.	For over 5 years		
Agree	my wife suffered badly during palliative care and really, really wanted to go but was denied	For over 1 year		
Agree	Understandably this is an emotive subject which many people will have difficulty with. Whilst it would be a 'natural rection' for people to 'recoil' at the thought of Anyone's Life being terminated prematurely [as is the case with the sadness of suicide] I do believe that, with the appropriate and proposed safeguards in place it is not for the 'General Public' view to prevail. The only 'stakeholder' are the person suffering greatly and their immediate family. Even there the Family must and will have the highest regard and respect ultimately for the wishes and suffering of the individual. That individual must not continue with intolerable suffering to appease the views of others The absolute obligation on Society is to ensure the necessary and appropriate safeguards are in place. That given we must support the decision and wishes of the person suffering	For over 1 year		Beyond the safeguarding parameters there should not be additional 'Obstacles' that prolong the suffering of the individual

Agree	I agree because when a person is no longer able to enjoy life or participate in normal everyday procedures and feel very depressed and useless. They should be able to make the decision of ending their life as they really don't want to see their loved ones suffer and cause them to end up not well themselves. Especially when they rely on their family to do everything for them, and they feel utterly useless.	Not Answered	If the person wanting assisted dying is a close family member and living here with their family to be close with them, then I think they should be allowed to choose assisted dying so that they are with their family and not alone elsewhere.	
Agree	Individuals should have the choice to decide if they want to end their own life if they are suffering from a terminal illness	For over 1 year		We should be supportive of forward thinking legislation which allows people to make decisions for themselves
Agree	I wish to have the right to end my life before I become incapacitated through illness and /or old age and lose all dignity and quality of life. Quality of life is more important to me than quantity. I would like the kindness we show to domestic pets in ending their suffering to be extended to humans.	For over 5 years		
Disagree	When we allow assisted dying, we give people the leeway to take their life whenever they want. We allow people to be manipulated into agreeing to the assisted dying and we also allow murder in our society. Life is precious and it should be so till our last breath but not till an individual decides it's our time to go. Let the terminally ill have the precious moments with family, they may struggle but those moments last forever in the family and care giver memory.	Not Answered		There shouldn't be a process as this should be prohibited. This is Akin to murder or suicide which should be strongly condemned!
Disagree	Doctors have helped to alleviate pain in the terminally ill for a long time.	Not Answered		Assisted dying is open to abuse. As is happening now in so called civilised countries,Canada being one!!

Disagree	<p>Suicide is self-murder. The Sixth Commandment states, ‘You shall not murder’ (Exodus 20:13). To assist someone in self-murder is thus wicked and evil, and contrary to God’s law.</p> <p>Government’s God-ordained role is ‘for the punishment of evildoers and for the praise of those who do good’ (1 Peter 2:14). To pass legislation permitting the assistance of someone in his or her self-murder would be to subvert that order by failing to punish the wicked and instead praising them. To introduce or pass a bill to permit the assistance of a person in his or her self-murder is therefore to rebel against God and to exceed the bounds of authority that He has established for government.</p> <p>Rebellion against God is always foolish and brings His just judgment. A Day of Judgment is coming when all people will have to give an account to their Creator. Dr. Allinson – and all those who join him by supporting this proposal – earn themselves God’s wrath; they place themselves in eternal jeopardy and bring judgment upon our nation. They must therefore repent, and cast themselves upon the mercy of God in Christ Jesus.</p> <p>God ‘now commands all men everywhere to repent, because He has appointed a day on which He will judge the world in righteousness by the Man [Jesus Christ] whom He has ordained. He has given assurance of this to all by raising Him from the dead.’ (Acts 17: 31–32)</p>	Not Answered	
Agree	I feel it’s a human right to be able to decide whether you want to continue living or not. If I was in a vegetative state and couldn’t do anything for myself I’d certainly take the choice to end my own life! You aren’t loving if you’re in that state.	For over 5 years	It should only be available to members of society that are in a deteriorating state - I.e Alzheimer’s / late stages dementia/ vegetative state - the ability for next of kin should be able to request assisted dying for relatives should they fall into the above categories.
Agree	Having watched the long term suffering of a loved one - I want to be able to make my own decision to avoid this for myself.	Not Answered	

Disagree	<p>I am a Consultant in Palliative Medicine working at a hospice in Greater Manchester.</p> <p>Assisted dying drastically undermines the practice and principles of Palliative Care and is a threat to the safety of vulnerable patients; it also threatens the relationship of trust and care that exists between patients and healthcare professionals whose duty is to 'do no harm'.</p> <p>There have been many concerning reports from countries that have already legalised assisted dying which detail harrowing tales of pressure on vulnerable patients to end their lives to prevent them being a 'burden' on their families and society. The Oregon Health Authority's annual report from 2020 (Public Health Division, Center for Health Statistics, 2021) showed that 53% of people opting for assisted suicide mentioned the fear of being a burden on family, friends or caregivers as a factor in their decision. There have also been reports of slackening of what were originally 'rigid' laws to allow other groups to be euthanised- even though some were not terminally ill. Some places have now introduced assisted dying for children. In the Netherlands despite tight laws initially when assisted dying was introduced in 2001, this has now extended to other groups including those with dementia and no capacity to consent to this decision. A review of trends in the Netherlands (Chambaere et al., 2015) showed that in 2013 more than 25% of physician-assisted deaths were categorised as "Hastening of death without an explicit request from the patient." This most commonly involved elderly patients over 80 years old, those in a coma and those with dementia.</p> <p>Access to good Palliative care services is extraordinarily fragmented across the UK which means some people have access to Gold standard levels of care, others do not. A recent report by Pask S et al. (2022) shows the level</p>	Not Answered	
Agree	Because it provides a humane way for people who have no prospect of improving their state of health to end their lives.	For over 1 year	
Agree	I have been aware of people who are going to have a horrific end to life. Why prolong and put them through this if their wish is to die.	Not Answered	
Agree	Yes i agree that assisted dying should be permitted, my reason for believing so is it gives some the ability to make a decision for themselves, whether they want to be pumped full of medication to take pain away (which is existing not living) or take the matter into their own hands, arrange for loved ones to be with them and have chance to speak to them before passing away. we put pets down that are suffering, or 'can't be helped' why should a person be made to suffer, that is not a memory i would want my family to have of me, when instead they could be by my side as i slipped away peacefully at my own choosing.	For over 5 years	
Disagree		Not Answered	It is criminal act to interfere with life

Agree	I honestly feel to deprave someone of their wish is an incredibly selfish thing to do and often than not when I have spoken to people on this view they are religious, which fine, if that's their views great, but it shouldn't ever be used as any medical argument. No one should be able to tell a terminally unwell (or potentially) that they must continue to suffer with the physically and mental health.	Other	I do feel like mainly residents should use this service but we are all human and have a duty of care, to turn someone way wouldn't be a good thing either	I think if the person doesn't want to die at home there should be a safe place they can go. Maybe an extension on Hospice or on the nobles site which is large and there are a few buildings that can be utilised for this. I also feel once the person has decided that assisted dying is the way for them and they have been assessed and accepted, maybe they can be asked once more but then no more. As I feel, especially vulnerable people could retract because they might start putting others thoughts and feelings first and again that's incredibly selfish, the taboo needs to end. There is no shame in wanting suffering and pain to end. I would much rather someone have that choice instead of being pumped with Opioids and sometimes that ends in overdosing when a patient is already too weak.
Agree	I Think I Should Have THe Choice	For over 5 years		
Agree		For over 5 years		
Agree	There should be more autonomy for people at the end of their lives to decide on the manner of their death. They should not have to linger in pain or distress simply because our medical system has historically seen the death of any patient as a failure. We are not debating euthanasia, but a very limited and tightly controlled form of voluntary death. Not everyone will wish to take advantage of this, there are many people for whom suffering at the end of life provides an important spiritual transition, or who simply wish to spend as long as possible with their loved ones, but for those who suffer pain, indignity and distress of a kind which we feel is unfair to inflict upon our animals, there should be the option to decide to end that state.	For over 5 years		I feel there should be an alternative to a written signature on a written declaration for those physically incapable of writing. Similarly I am concerned that some of those most in need of this bill may be excluded by virtue of a physical incapacity to fulfill it's requirements. I meant to say earlier that one of my reasons for agreeing to the need for this bill is that many people must currently be forced into a position where they take their own lives in ways that may not be successful and cause lasting harm, or cause unnecessary distress before death, may end their lives before they need to or are really ready to, out of fear that when they do want to they may be unable to or may be prevented, and cause untold trauma to relatives and whoever finds their body.
Disagree	I feel it is something that should happen in a natural way and there are already measures in place such as end of life care to make the process less painful.	Not Answered		

Agree	The medical profession already provide palliative care to the point of death and have limited capacity to use stronger medication that might leave a Doctor otherwise substantively responsible for causing a death. I feel that any extension to the existing position should be limited to treating the consequences of the very limited number of terminal conditions where a peaceful and relatively pain free death cannot currently be assured to the patient. Such extension should only consist of a carefully worded indemnity for Hospital and Hospice specialists in the use of the band of regulated medicines currently being used to alleviate terminal illness such that they can be used to maximum and potentially fatal effect.	Other	28 days with an established address owned or rented i.e. not just arrived on the boat or plane	A subject such as this should very definitely be put to the public in a referendum with several different proposals. I suspect we are really only sensibly talking about adjusting existing permitted treatment levels of terminally ill people (irrespective of their age or mental state and not necessarily on request) to avoid the suffering that only occurs with very limited and frightening conditions for the patient. By the very nature of the conditions, these would not be people dying at home and they would all be under specialist care in hospice or hospital. Before drafting the Bill, it is necessary to identify the specific terminal illnesses to which it would apply and where conventional medicine currently fails to provide a peaceful and relatively pain free death. The Bill should really be termed "The Health Service treatment of Terminal Illness Bill". What the change in the law really requires is for society to be able provide comfort and kindness to the dying and that will involve, in limited cases, using much stronger and lethal sedative medications than are currently available to Doctors in hospice or hospital settings. I think it fair to say that the Island already assists dying just that Doctors lack the scope to use sufficient medication. If we provide an indemnity against prosecution for the specialist hospice and hospital doctors and leave them with the discretion as to how and when to use the medication within a restricted timescale it should be an improvement to the current position. Where mentally able to do so, patients should be permitted to express their opinion in a like way to "do not resuscitate" so as to convey but not dictate their views to the specialist.
Disagree	Even if I'm terminally ill, I don't think I'd like to commit suicide so why will I support assisted dying. I believe in the sanctity of human life and it is the duty of each individual and society as a whole to care for the person. The eventual result may be continued suffering and death but the loving care the person/society will show what kind of society we have.	Not Answered		
Disagree	The health service is currently in a crisis with lack of funding and an inability to fully care for patients who want to live. I have no trust in the government to adequately investigate the impact this legislation would have on the island health service.	Not Answered		This is a very ambiguous questionnaire. If the first question is answered “no” what is the point of having the other questions available?
Disagree	One of our laws is that you cannot kill another person, to agree with you is to agree to murder	Not Answered		Please do not do it in my name
Agree	A terminal diagnosis should entitle an individual to decide for themselves.	For over 5 years		
Agree	The choice of how one should end their life when faced with unimaginable pain and suffering is one which must be available (with adequate safeguards) to everyone. To die in a place and in a painless and dignified manner is paramount	Not Answered		This should be enacted sooner rather than later

Disagree	<p>The doctor/patient relationship is very important and at present patients expect their doctor to keep them alive. In A &E. many patients say "Don't let me die" or words to that effect, showing great faith in their doctors' abilities to keep them alive. It is vital that this trust shouldn't be compromised. Doctors conscience rights are also important „During interview no doctor should be made to feel that he has to, take part, in any way, in assisted dying/suicide.</p> <p>When anything is made legal, there is an escalation of "rights".demanded by some. How long would it be before there were demands for ending the lives of the disabled.and other vulnerable groups? If assisted suicide were made legal. many old or ill patients would feel that they'd not want to be a burden on relatives or caregivers and feel it was a duty to request assisted dying. For example, my husband is currently in Nobles Hospital after suffering a stroke and he often apologises for being a burden to the nurses ,doctors and myself.</p>	Other	<p>at least 10 year. this would serve to prevent suicide tourism and migration.</p>	<p>"unbearable suffering " is a term which cannot be defined so should not be used.Similarly 'unable to take oral medication' can be interpreted many different ways-physically, mentally or just plain anxious.people should be able to change their minds. 14 days doesn't seem long enough - 4 weeks would be better.</p>
Agree		For over 5 years		
Agree	<p>To prolong suffering due to the inability to let someone decide their own fate is not conducive to modern society</p>	For over 1 year		
Agree	<p>I have ticked 'agree' but I don't think it should be limited to the terminally ill.</p> <p>Suicide is the last act of the free man. The idea that it is somehow morally wrong is an outdated religious notion. Everyone should have a choice in how they end their life. The onus should not be on how likely or soon as person is to die, but on insuring they do not wish to live the life they have left.</p>	Not Answered		<p>I've answered 'Not sure' to many of these because the questions are phrased in such a way that I can neither definitively answer Yes or No.</p> <p>I don't see what this has to do with doctors. I think the responsibility is a separate and specific role. The person in that role could consult a doctor or psychiatrist on the patient's ability to make a decision, but if the onus is not on ensuring the patient is terminally ill, but instead ensuring that the patient no longer wishes to live, it's not really a medical decision. That role would be responsible for insuring the patient has not been coerced or feeling under pressure, that they have received all the available medical and psychological help, are aware of all further options and understand the consequences for their loved ones.</p>
Agree	<p>So they can know when they will end it instead of dying at some point without saying their last goodbyes</p>	Other	<p>Know as a resident for 6 months</p>	

Agree	<p>It is important that individuals have a choice - that they can opt in or opt out of assisted dying (as they can for organ donation)</p> <p>My own choice would be assisted dying, as and when it may be appropriate for me. Quality of life being more important to me than quantity.</p> <p>I have seen human suffering prior to death - when death is described as a blessing</p> <p>I have seen many of my much loved pets slip quietly and gently away within seconds of a lethal injection.</p> <p>I can see no reason why I, and others, should not have the option to slip quietly and gently away if that is our personal choice. I would deem it a kindness</p> <p>The health, illness and timescales will be different for each person and decisions regarding assisted dying should be tailored to each individual.</p> <p>There are some conditions which may not be terminal, but may cause prolonged suffering. Consideration should also be given to these circumstances.</p> <p>I would not presume to inflict my decision upon others who do not agree with assisted dying. I do not expect those people against assisted dying to inflict their opinion/decision on me.</p> <p>I do not wish for my life to end in prolonged suffering (palliative care only goes so far)</p> <p>I would much prefer to have assisted dying available on the Isle of Man than have to travel abroad</p> <p>There should be provision within Legislation for Assisted Dying to ensure that pensions, life insurance etc should not be negatively affected by the legal process of assisted dying.</p>	Other	<p>Perhaps a consideration for the future, once assisted dying is established for Island residents.</p>	<p>20,22,23 - depends on individual circumstances.</p> <p>25 - it may be desirable for a health care professional to 'be on hand' in the event of any problems, but perhaps the patient and family may prefer for privacy in the 'dying room'.</p>
Agree	<p>After watching my dad die a horrific death from cancer, I wish we could have done something. He was dying, in terrible pain, and we could do nothing.</p>	For over 1 year		
Disagree	<p>The Law as currently written protects many people whose well being could be impacted by such legislation. This harm is likely to become greater as there is strong evidence that initial safeguards quickly get challenged and fall away, and that euthanasia is introduced where people are supported to end their own lives who are not terminally ill.</p> <p>New legislation could introduce risks to vulnerable, sick and lonely people, especially where assisted dying / assisted suicide would release financial assets for next of kin. This is perhaps a greater risk on the IOM where wealthy people come to live in their retired years to preserve their family wealth for the next generation. Introducing this new legislation also potentially attacks the trust between Doctors and Patients and could make it even more difficult to recruit new Doctors to the IOM. Doctors are opposed to the proposed new legislation.</p>	Not Answered		<p>This survey assumes that Tynwald will approve the motion to introduce assisted dying legislation and the questions are skewed to produce statistics that falsely indicate support for it. This survey is discredited and should be abandoned. An independent organisation which is impartial should be appointed to evaluate the views of the Manx public in a more honest and credible manner. Percentages of respondents should not be quoted to Tynwald. The actual number of respondents should be advised publically. Tynwald should be asked to debate how many of the population should be in agreement with the proposal to justify changing the Law, and a public vote should be organised. Tynwald should not be given the opportunity to vote on changing the Law simply based on the views of a small percentage of the respondents to the survey. The views of the proposed new MLC's to be elected in March on the proposed legislation should be made clear to the Public before they are elected, to highlight that the voting numbers for the proposed changes to the Law are not being orchestrated.</p>

Disagree	<p>God's Word, the Bible, is normative in all areas of life. It forbids what this bill proposes.</p> <p>Owing to the fact that men and women are created in the image of God, there belongs to every human life (and every moment of every human life) a significance that transcends each individual's personal, inner experience. Although we are called to alleviate suffering where opportunity and ability affords, we must also recognise the inestimable significance and profundity of the human lives and experiences of those who are suffering.</p> <p>No individual lives in complete isolation, but rather takes their place within a family and/or society. It is not therefore the case that the bill will only affect individuals who may chose to avail themselves of its provisions. Families and society at large will also feel its consequences. Our society will certainly become more selfish, for instance, if it contains fewer terminally ill persons in need of care. Furthermore, the thought of living in a society in which the premature ending of human life is normalised is tragic and terrifying in equal measure.</p> <p>The bill will inevitably open the door to the ill treatment of the most vulnerable members of society. No matter what safeguards are put in place, simply by virtue of the fact that the legislation exists, some people will feel pressured into seeking a so-called assisted death.</p> <p>Although the bill mentions only terminally ill patients, should it pass in to law, it will not be long before other patient groups challenge for inclusion. This has occurred in every country that has introduced similar legislation,</p>	Not Answered		
Agree	Under carefully controlled criteria, a change in the legislation has the potential to alleviate much suffering.	For over 1 year		
Agree	I have ovarian cancer and know at some point it will kill me. Dying is not the worst thing, it is what I will have to go through to get there that scares me. If I am to die anyway why can't I choose when it happens and go peacefully as opposed to having to enduring weeks of pain and suffering beforehand. Why do I have to become totally dependent on others for even the basic tasks, loss of dignity just to end up dead anyway. We wouldn't let animals suffer but we insist on letting people suffer long slow deaths.	For over 5 years		The process should not be too intensive, because the person who has made this decision will have already thought long and hard about it. We should be able to state in our living will this is what we want should we get told we have a terminal illness. Once we have been told we should be able to go through the doctor process then. Then it will be up to us at what point we get the medication and in private with out family/ friends choose the time to say goodbye. This is not killing but merely allowing someone to die with dignity.
Agree	I think it is gracious to allow someone to have power over when they die if they are terminally ill. Especially if their illness will deteriorate them further which will give them no quality of life.	For over 5 years		I do not think it is safe for people to have the option to collect it from the pharmacy and take it at home. I think it is safer for it to be administered with the health professional in the room whether at home or in a medical setting.
Agree	Everyone should have freedom of choice over their own life and death. A basic human right.	Other	Resident status for 10 years plus.	Please to your utmost to pass this Bill. I have had far too many personal and work experiences with people dying in pain begging to be allowed to die. These experiences have stayed with me.

Disagree	I cannot shake the feeling that no matter whether there is legislation or not, it is murder (as is abortion) if you take someones life. Who are we to decide if someone lives or dies?	Other	I do not agree with the possible leguslation so it does not matter about the regulations behind it.	My mum suffered in later life, she wanted to die. It was very hard to watch and live with.However I believe that God gave her every chance to accept Jesus as her Saviuor. Indeed she made a commitment on her deathbed. A privilege that would have been taken away had she been able to end her life by any legislation passed. I believe she is in a good place now.
Agree		Not Answered		
Agree	It is a human right.	For over 5 years		Those with power of attorney should be involved. Or a person appointed to that position if possible.
Agree	I think that everyone who is in a terminally I'll state should have the choice of when to die. If you had a sick animal it would be put down for its own benefit. But when it comes to humans they are made to suffer and live in pain against their will.	For over 5 years		Everyone should be given a choice of when to die if they are very sick and unwell. I have worked with and seen people in hospital in vegetative states or locked in and it truely is the scariest thing to see. Their eyes speak a thousand words.
Disagree		For over 5 years		
Disagree		For over 5 years		I feel this whole idea and discussion is a sad reflection on our society. There are so many things which will potentially cloud any implementation, for example it will reduce the financial burden on either the family or government but is this a good reason to end a life? I would much rather time and effort is spent on how we better love, care and support people who need it most. And i speak as someone who knows as my wife has a rare neuro degenerative condition which is moving into it's later stages. End of life planning is very hard and i firmly believe adding in this would hinder rather than help. This is why i have only answered selected questions as i do not believe we should be thinking about how it might be implemented before we decide whether we are supportive of the principle and i am not. Is this really what we want the Isle of Man to be known for - i sincerely hope not.

Disagree	<p>The killing of any individual is wrong.</p> <p>As with abortion law and experience in other jurisdictions it is inevitable that the law will be pushed and restrictions reduced. The risk of dying becoming euthanasia for profit or otherwise is real.</p> <p>The effect on those “assisting” in killing is unknown but the military shows the mental impact of taking life – the reason is irrelevant.</p> <p>Doctors are given an ethical dilemma and in time conscience reasons will cease to be an acceptable defence. This as happened elsewhere in both the medical profession and elsewhere.</p> <p>There is no need for this bill which will become dated as more money is on palliative care and counselling which is becoming ever more successful in improving the quality of life before a natural death.</p>	Other	over 10 years	<p>The killing of any individual is wrong.</p> <p>As with abortion law and experience in other jurisdictions it is inevitable that the law will be pushed and restrictions reduced. The risk of dying becoming euthanasia for profit or otherwise is real.</p> <p>The effect on those “assisting” in killing is unknown but the military shows the mental impact of taking life – the reason is irrelevant.</p> <p>Doctors are given an ethical dilemma and in time conscience reasons will cease to be an acceptable defence. This as happened elsewhere in both the medical profession and elsewhere.</p> <p>There is no need for this bill which will become dated as more money is on palliative care and counselling which is becoming ever more successful in improving the quality of life before a natural death.</p> <p>There may be hard cases but that does not justify changing the law.</p> <p>The authorities may decide not to prosecute or after a proper legal trial examining all the circumstances a jury could recommend clemency or a judge exercise discretion in sentencing.</p>
Agree	it should be a competent individuals personal choice and no one else's.	Not Answered		just get on with it!
Agree		Not Answered		
Disagree	<p>As a former consultant surgeon on the Isle of Man I have treated many patients with terminal illnesses and have not felt legally constrained in the use of powerful analgesics or other drugs to treat the pain and anxiety.</p> <p>Often such treatment will effectively shorten life but under existing law is perfectly legal. Although it is a thin dividing line the deliberate administration of a specific cocktail at a specific time ignores the fact that it is impossible to accurately predict how long a person with terminal illness has left to live.</p> <p>In my opinion palliative care in the Isle of Man is of a remarkably high standard and readily available and should be the treatment of choice.</p> <p>Were I still practicing I would not undertake to aid in assisted dying.</p>	Not Answered		<p>It is difficult to answer some questions given that in principle I am against changing the law. Therefore I have either ticked not sure or not answered the question in some cases. I am rather dismayed that the proposed bill is being brought forward by a qualified medical practitioner.</p>
Agree	If you allow a pet to suffer you would be prosecuted so why is it permissible for a human being to be allowed to suffer	Not Answered		Don't let people suffer unnecessarily
Agree	I feel that persons should have the right to be given help to dye at a time and place of their choosing. This right is available to persons who have the funds to travel to Switzerland but not to the general population.	For over 5 years		
Agree	I personally have expressed my wishes to my family that I do not wish to live a life without quality. For me, this means suffering, pain in the lead up to the inevitable.	Not Answered		
Disagree		For over 5 years		

Disagree	<p>The appropriate safe guards are not in place and experience shows that safeguards in practice are always abused. Also as proved internationally, once the door is opened different political times dispense with safeguards slowly and calmly to suit circumstances without concern for individual circumstances.</p> <p>Doctors are sworn to do no harm, healthcare should not promote the opposite.</p>	Other	<p>All the eligibility questions are skewed to ensure I answer in favour of assisted dying. I don't feel it should be available to anyone of any age.. you purposefully don't allow me to state that</p>	<p>This consultation is skewed to having to engaged with the assumption that the bill WILL go ahead and how my opinions will affect that. The consultation should be unbiased and allow for all opinions both in favour and NOT in favour and this does not do that.</p> <p>The consultation furthers cements the impression that if the consultation isn't conducted in a fair manner, how can we have trust that the safeguards will be in place and politicians won't alter the safeguards to allow elderly, depressed, disabled members of society feel under pressure to end their lives to be less of a burden instead of living life to the full. IOM Government already highlights the issue of the financial burden of the elderly, social care, disabled etc.. are on society and on Government finances, this is another piece of legislation that reinforces that narrative. Disturbing that a Doctor takes a hypocRACTic oath to do no harm and would propose this.</p>
Agree	<p>Yes yo the terminally I'll if it is their personal decision and not one they've been coerced into by family, health professionals or any other entity.</p>	Not Answered		<p>The option should be their yo make an advanced request for assisted dying in the event they deteriorate to the point where they loose the capacity to make the decision if and when the develop a neuro degenerative condition such as alzheimer's, dementia etc</p>
Agree	<p>Any individual should not be made to suffer once medical assistance has become useless. Laws exist to protect animals from unnecessary suffering (and rightly so) yet humans are expected to endure. This cannot be right.</p>	For over 5 years		<p>Signature: If the person seeking assisted dying is physically incapable of signing a consent form, an alternative method of giving consent must be available. Verbal consent for example.</p> <p>Referring of such patients to other medical professionals MUST be done expediently, it cannot be a delay tactic.</p> <p>ONLY THE PATIENT KNOWS HOW MUCH THEY ARE SUFFERING. IT IS THEIR RIGHT TO CHOOSE.</p>
Disagree	<p>Assisted dying/euthanasia is profoundly harmful to society, and puts vulnerable individuals under pressure to end their lives for fear of "being a burden". Good quality palliative care has been shown repeatedly to control nearly all suffering in terminal illness. As a doctor I am extremely concerned that a vocal minority are attempting to push very harmful legislation in the Isle of Man. Experience from Canada, Holland, Belgium and other countries that allow assisted suicide/euthanasia shows that so-called safeguards are removed within a short time of being introduced, and a slippery slope occurs whereby the eligibility criteria for assisted suicide/euthanasia is widened hugely. For example, in Belgium children are allowed to be euthanised.</p>	Not Answered		<p>Assisted dying/euthanasia is wholly un-necessary when good quality palliative care is practised. Countries that allow assisted dying/euthanasia always widen the criteria for assisted suicide/euthanasia, meaning that so-called safeguards are meaningless. The only safeguard that works is to maintain the law again assisted dying/euthanasia in the Isle of Man.</p>
Agree	<p>I believe individuals have the right to end their own suffering at a time of their choice.</p> <p>People have to tolerate extreme pain and suffering. Only the lucky minority will be able to have specialist end of life care in the hospice.</p>	Not Answered		

	Agree	As an adult with a terminal illness I very strongly agree that assisted dying should be permitted. I know that I will suffer greatly if I have to slowly die and I would rather have good memories and time with my family instead of them watching me be incapable and in pain. I have two children and I cant think of anything more distressing than them having to watch me in pain and suffering. It will also distress me, knowing that their last memories of me were that. It is inhumane, we treat our animals better than we treat our terminally ill as we do not force them to suffer. I think their should be a longer limitation on it as some conditions are not quick to kill you, in my case I have MS and so I may have no cognitive function for years. This is not life. It is a prison.	Not Answered		There should defiantly be a provision for a living will or advance directive as I would be doing that for sure as I do not want to be stuck in my body as it slowly degrades if I lose the mental capacity to make the decision. The living will or advance directive should be signed off by the relevant health professionals to ensure safe guarding.
	Agree		For over 1 year		
	Agree	I have had family members with serious illness & dementia, being kept alive with no dignity for many years. They would never ever have wanted to be alive in that condition. People should be able to make the choice. It works in other countries and if well regulated we (the IOM) could be a first here. Who would actually wish to be kept alive in pain, not knowing their family, receiving personal care for years. People are born to die, its just making end of life more bearable when all hope has gone before their death.	Not Answered	people could pay to use the service here like switzerland	its a very personal thing. No one is saying it should be dictated, if properly regulated people should have the choice when they wish to die if suffering. A living will is a good idea so the persons wishes are legally kept before they get dementia/deemed not well enough to make the decision
	Agree	I feel that a person at time of full understanding and capacity should be able to make their own decision about their care and future. I strongly feel that a decision should NOT be made by a panel of professionals or by MHK's who impart their own beliefs into a decision for another human being.	Not Answered		
	Agree	The individual should have the right to choose when the quality of their life is not how they wish to live.	Not Answered		
	Agree	Everyone has the right to choose when they die as long as it is done in a safe way	For over 5 years		
	Disagree		Not Answered		Prior to passing the legislation, the Isle of Man needs to first ensure that there is a robust and independently regulated legal profession in place. This is to ensure that those negatively impacted by failures can seek justice. Litigation funding should also be potentially be made legal, again to ensure access to justice. This is a complex matter and needs a modern legal system to support it.

Agree	Strongly agree with in-depth consultation with patient overseen by 2 doctors/psychologists. If some one is in pain - cannot function as they have previously and has made a living will stipulating at what point they wish to end life	Not Answered	Assisted dying should only be allowed in the following circumstances Terminal illness Continuous vegetative state If a person stipulates they want to end life if they are in constant pain/cannot feed or toilet themselves and are bed bound
Agree	<p>I have supported and witnessed a close relation in their final years / months of suffering from IPF, by the time they died from sepsis their quality of life was severely reduced to just existing, They were already fully signed and committed to attending Dignitas as they were adamant they wanted some control over their end of life. They believed this was far more dignified and civilized and far less mentally draining for those left behind. Unfortunately their cognitive awareness was so low the logistics of travelling to switzerland could not be completed. Deterioration was accelerating and their final six weeks were horrific for all concerned.</p> <p>As a society we purport to be civilized but that runs contrary to not legalizing assisted dying. I am now 68 and have been lucky with my health however should i contract a terminal illness reducing my quality of life and of such that it also adversely impacted the lives of my wife, children and grandchildren i would certainly want the opportunity to choose how i died.</p>	For over 5 years	I believe it would be beneficial to have a facility where people who do not wish to use the home assisted dying process could go, very similar to Switzerland.
Agree	<p>When people are suffering they should have a choice if they wish to continue living or not.</p> <p>If you are no longer able to care for yourself you should have a right to choose to live or die</p>	Not Answered	<p>It is a subject that has been debated for many years. We allow human beings to suffer immense pain and mental distress that in modern society is unnecessary.</p> <p>It is the age old argument that we would not allow an animal to suffer.</p> <p>However the person should have capacity to decide on assisted dying or should be written into a living will.</p>

Disagree	<p>I work as a volunteer with vulnerable adults many of who have a negative life experience and who tend to have a pessimistic outlook and suffer from low self-esteem. It is unfortunate that ill-health, both physical and mental also tends to be prevalent among this sector of our population.</p> <p>I have huge concerns that the introduction of this legislation will be received by such people as an indication that human life is expendable and that with the removal of the concept of the sanctity of life which we as a community have historically accepted that they will see this as a sea change in value systems. I suggest that this will lead to an increase in suicide.</p> <p>I also have concerns when looking at the experience of other jurisdictions where similar legislation has been introduced that the evidence points to pressure being brought in the decision to end life which are based on financial considerations and those who choose to benefit through inheritance.</p>	Not Answered	<p>I have found it difficult to answer some of the questions in this consultation feedback as most of the questions are based on the underlying assumption that the Bill will come into law. I am against the proposal but it would appear that by answering some of the questions I am giving my consent and approval to the proposal.</p> <p>The consultation is very poorly presented and looks like it has been designed to provide answers that the mover of the Bill is looking for to support his motion.</p>
Agree	I feel that people with terminal conditions or in prolonged suffering with no hope of easing their suffering should have the choice to end their life	Not Answered	
Agree	I have a D.N.R. In place, but I don't want to be kept alive if in a vegetative state, my children are aware of my wishes.	For over 1 year	
Agree	On the basis of maintaining dignity and control over ones life. I wholly understand that there needs to be stringent control and legislation covering this.	For over 5 years	
Disagree	I think it should be for anyone who is ill and unable to live a normal life. I for one do not want to live in any form of care home or hospice and I do not want my family giving up their life to look after me, I have lived my life and they should be able to live theirs. If I am unable to feed myself, take myself to the toilet or look after myself then I want the choice of whether to end my life or not. All my family are aware of how I feel and have been told to leave all my medication next to me they are not to put it out of reach,	Other	checks should be made to ensure they didn't move here just for assisted dying
Disagree	Medical treatment is constantly advancing - who's to know when a disease is terminal or not...	For over 5 years	
Agree	It is so wrong to make a person suffer when there is no good outcome to the situation and they have made it very clear that they wish to end their life. A person who is terminally ill may not want to face the indignity of helplessness and to see the effect on their loved ones. As many people say 'you wouldn't let an animal suffer'	Not Answered	<p>Clearly the process has to be safeguarded but I think it should include people other than those who are diagnosed as terminally ill. My greatest fear, and I don't think I'm alone, is to lose my dignity and self respect by having to be in a care home and be unaware of my surroundings or family. I'm sure there are people who will take their own lives to avoid such a distressing situation, and possibly before they are ready to die, just incase they become incapable of doing it when they deem it necessary. it would bring great peace of mind if I thought that my family could follow my wishes and call in the doctors when I became incapable.</p>
Disagree		For over 5 years	

Disagree	<p>Open to abuse - the isle of man does not have the expertise to deal with this legal and ethical minefield. I worry greatly that the isle of man government sees this as "the next big thing" for the island in terms of revenue as the island is in economic downfall and I worry they are not entering into this area for any other reason than a financial one.</p> <p>Capacity is a huge issue. Capacity and ability to make informed decisions and choices can be affected in the short term where a life ending decisions can be made - ending of life could potentially be a permanent solution for a short term problem.</p> <p>People could feel they are a burden and that this is the only choice. More emphasis and funding should be put into improving quality of life not ending it.</p>	Not Answered	<p>I am completely against this being passed in the isle of man - please see my other comments.</p>
Agree		Not Answered	
Agree		Not Answered	
Disagree	<p>Death is far too weighty a matter for us to accelerate or initiate. Having lost a dear friend to suicide, I believe it is never right for a human to decide when to end a human life, whether they are suffering from mental health problems or physical diseases, life still has value and should be protected. Thankfully, medicine allows us to provide excellent palliative care. Furthermore, the vulnerable who wish not to be a burden on family should never be made to feel compelled to accept assisted dying.</p>	Not Answered	<p>I could not respond to all of the questions as it seemed to presuppose agreement with the basic premise.</p> <p>I do not support any measure of assisted dying and would not wish it for any of my relatives, myself or anyone on this island.</p>
Agree	<p>- Your body, your decision.</p> <p>- If animals are allowed to be put out of their suffering, it is inhumane to deny people that option.</p>	Not Answered	<p>1) Thank you Dr Allinson, this is an excellent initiative and long overdue.</p> <p>2) One size does not fit all in this world. This is certainly not for everyone, but it does provide a necessary option for those that do believe in it.</p> <p>3) Any civilised society should allow for this to be done in the privacy of the affected person's own home.</p> <p>4) If approved, this scheme would also be of great benefit to UK residents, where the Government is sadly not as forward thinking as our one.</p>
Agree	<p>My body is my body. I should be able to make my own decision if I wish to to have assisted dying. It is no concern of the Government or nutter religious groups and the nonsense they believe in. Do not understand item 9.</p>	Not Answered	
Disagree		Not Answered	<p>I don't believe assisted dying should be legal and some of the questions I have answered no to are not relevant to anyone with this opinion.</p>

Agree	I am totally behind this. After seeing 2 members of my family die from cancer I personally think it's best to have the choice as it's unbearable to watch a loved 1 go through so much pain and lose bodily control which must be embarrassing for both members of the family so it's only right that they get the choice to end there own life with dignity. No matter what disease they have will eventually cause them to pass they should have the choice to end their own pain and suffering	Not Answered		Let them have the right to choose if they want to end their life with dignity.
Agree	In some circumstances assisted dying is most humane thing to do.	Not Answered		This is close to home at the minute because my nana is currently in hospital and there is nothing they can do other keep her comfortable but even that's not working she in lots of pain. Today she told me all she wants is to die, she will not recover from this. With the laws at the minute all we can do is watch her suffer til she dies and it wrong.
Agree	Having known people who have committed suicide, assisted dying would take a lot of the anxiety, worry, heartache, etc. away from people who might otherwise witness a suicide, or be seriously upset by it.	Not Answered		
Agree	If I am in pain and dying and wish to end my life via assisted dying I should have that right. We have our dying animals "put to sleep" because we know it is the kindest things to do to end their suffering so should we expect human beings to put up with it? Assisted dying is a choice - you don't have to sign up for it but if you do your wishes should be respected.	Not Answered		
Agree	While safeguerds need to be in place, this is a decision for the individual.	Not Answered		
Disagree	Terminally ill people have palliative care that eases their end of life. I value life and the chance to reflect on one's own life is a gift not given to those who die suddenly. End of life is a time also for family and friends to grow and reflect, a chance to come to terms with the journey of passing and then to grief and moving on. The Liverpool pathway was an abuse of elderly patients as was the use of midazolam and morphine on care home covid positive patients. Assisted dying would be used to coerce vulnerable people or lead mental health patients to see it as a solution instead of working through life's troughs. Assisted dying is no such solution - at best it is expedient and does not enrich end of life	Other	Stop trying to get me to give an answer when I've already said I don't agree to assisted dying	I think the options on this this survey are manipulative - I said no to assisted dying so I have no need to tick options to questions 17,19,21,24-26
Agree	I strongly believe that we should have the choice to end our lives with dignity when the time comes. I do not want to suffer a long undignified, painful end to my life.	For over 5 years		If a person does not want to die at home then a suitable place should be available.
Agree	Assisted dying is a humane response to ending unnecessary suffering. We should have a choice.	Not Answered		
Disagree		Other		

Disagree	Having had my father in law who suffered and died from Parkinson's disease it was important for ALL the family to be able to see him for as long as possible and spend time even in his last days. My biggest concern is given that so much of medicine is now driven by money and not patient care I can see and have heard in other countries this being used as an excuse to shorten peoples lives, when they matter. I also object to this as I only found out afterwards that the hospital took my mother off medication and was allowed to die without my consent. I was therefore not there when she passed away causing much distress.	For over 5 years	The fact a question asking if there should be a report makes me very worried as though there is something to hide. Why would you ever allow lethal drugs to be in the public domain with no control from a fully qualified health professional? This to me is an ill advised and bad piece of legislation with no thought to cost or application or human or family dignity.
Disagree	This is the thin end of a very unpleasant wedge where we don't understand the end results. Put money into good quality palliative care, not killing off the least able to defend themselves.	Not Answered	It is relatively easy for Dr Allinson and his followers to advocate killing certain individuals (for, stripping back the terminology like "assisted dying", that IS what is being discussed), the questions that are being avoided is "who would be excluded from this cull of the vulnerable ... and WHY?" ie if he is advocating killing patient a, would patient b who has "had enough of life" be afforded the same "treatment"?
Agree	I believe the individual in those circumstances should have the ability to terminate his or her life if stringent safeguards are in place. It is not acceptable in the twenty first century that organisations such as the church can or should prevent a terminally ill person determining that life is no longer bearable due to illness	For over 5 years	In circumstances we all hope to avoid an individual should be able to embark on a stringent legal process to end his or her life if the alternative is unimaginable pain or suffering. They should not be denied this by the beliefs of others only the law which should provide safeguards and assurances based on medical evidence, other's beliefs have no place
Disagree	Whilst I have not 'walked in the shoes' of someone who is terminally ill I fear that there is no guarantee that assisted dying will always be strictly voluntary and always be strictly controlled (one only has to look at how the introduction of new abortion laws has moved us to an 'abortion on demand' society).	Not Answered	This Consultation document has a clear bias towards supporting assisted dying as the bulk of the questions 'lead' the respondent down the road of accepting assisted dying is/ will be introduced and the Gov are looking for feedback as how to put some 'manners' around it!
Agree	My father is currently very ill is unable to get out of bed, talk, feed himself everything needs doing for him. He has been like this for 18 months now. He has no quality of life and if he was able to communicate I am certain he would not want to continue living like this. After seeing my father like this I have told my family I would not want to be kept alive if I was in his position and would rather die	For over 1 year	
Disagree	There are many loop holes. there is no guarantee that it will not be misused in the years to come from the public, the Government and health professionals. it does not put into account family and friends of the affected.	Not Answered	the questions are biased and there for irrelevant to me.
Agree	I would prefer to chose the right to die rather than lose my independence, dignity and have my loved ones see me deteriorate to that point when I have to rely on someone for everything. To me that is not a life, it's just an existence	For over 5 years	

Disagree	The current Isle of Man legislation is inadequate to accommodate this particular law. Assisted dying in other countries has evidenced loopholes. Currently suicidal attempts are high. This is indirectly supporting suicide. Psychiatry information cannot be evidenced scientifically and subjective. There is likely to be manipulations which cannot be evidenced once one is dead. Doctors are not free of own agenda. Scientific research is coming up with more helpful treatment to improve quality of life.	Not Answered	The questions have not accommodated those who are against. The survey is clearly biased in many ways. There is no evidence provided to confirm are pro it.
Agree		For over 5 years	
Agree	I believe with the correct legislation and checks and balances that it is the most humain response for end of life	For over 5 years	
Agree	I feel it is the individuals right, if the the criteria is met, if they are terminally ill, and negates unnecessary suffering. Also patients who have previously indicated their wishes to be allowed to die with dignity, if suffering from a life shortening disease where they became a long time burden on their family, whose life would be on hold until they passed away naturally. If you can't live your life as fully as possible, what's the point vegetating and wasting away in front off them, where you will not be remembered as the person you were.	For over 5 years	If had the choice, I would like it to be as dignified and a peaceful and as pain free as possible, home and surrounded by loved ones.
Not Sure	You do not mention of the adult is of sound mind.	Other	Do we want to be known as a country that will kill people if they pop on the boat and get here? 10 years minimum.
Agree		Not Answered	These questions are not open-ended so it is not a fair consultation. There should be a minimum of 3 doctors. No family member to touch medication. I was a nurse when abortions were allowed and many young girls were having multiple abortions. On what grounds? This will happen where some are coerced into dying so others can benefit. Our Laws and human behaviour will not prevent this. If it hapoens, it should be made difficult and any proceeds from a will should not be touched for a minimum of 5years.
Disagree	I do not believe what is being proposed is assisted dying, there are already measures in place to help those who are dying to suffer less, what I believe is being proposed is assisted suicide, which is a whole different ball game.	Not Answered	I cannot answer many of the above questions as I do not agree with assisted suicide at all. As a Christian I believe only God can create life and take life, we are told not to murder/kill, one of the 10 basic commandments, we are already murdering babies under the banner of abortion now we want to get rid of the elderly, disabled and depressed. When we have such a good hospice and there is opportunity for such good palliative care on the island I'm not sure why this is even being discussed.
Agree	Seeing the pain that can be caused by degenerative illnesses, specifically mentally, I would much rather choose to end my life with dignity before making those around suffer. Plus I wouldn't want myself to go through it, people with dementia can be in a state of constant fear due to confusion X Y Z.	For over 1 year	

Agree	<p>We don't allow animals to suffer but, thanks to a religious minority, humans are made to suffer.</p> <p>Not just the patient but also those who love them.</p> <p>Religion has an outdated place in modern public life and should not be involved in any government function or decision making.</p> <p>The choice should be for the individual.</p> <p>Be that a patient or a medical professional.</p>	Other	<p>Either a permanent resident during their working life or a Manx born person.</p>	<p>Setting cooling off times is unreasonable as each individual and their case are different.</p> <p>Any medical professional who objects to assisted dying should be prevented from unaccompanied contact with the patient.</p> <p>This would prevent religious intimidation.</p> <p>Many of the questions included in the survey do not give the option of 'other' with the ability to elaborate. I can understand why but it does restrict.</p> <p>If you allowed terminally ill dog, bird, snake or frog to suffer, you would be prosecuted.</p> <p>Should the same standards not be applied to the human population?</p>
Agree	<p>Other people shouldn't have a choice over your life.</p> <p>If you wanted to commit suicide, and as someone who lost a relative and friends to suicide, it is your choice.</p> <p>Why should those terminally ill be forced to suffer until their dying day when others are able to relieve themselves from the pain (physical and emotional) due to being more abled.</p>	Not Answered		<p>If the person changes their mind (and in my chosen route) has to return the medication, they should be reassessed by a psychiatrist to see whether they are of sound mind, should they choose to take the assisted dying route a second time.</p> <p>The concern with making people return the medication is that it could be seen as a pressure to fulfill the decision, even if they may not fully commit to it in the final stages, due to potential 'embarrassment' perhaps of having to return to the pharmacist.</p> <p>Also, having a health care professional present may cause a similar pressure feeling to commit without being able to reconsider at the last minute.</p> <p>I don't personally have a resolve for these issues, unfortunately.</p>
Agree		Not Answered		
Disagree	<p>As a nurse I do not think this is a good idea for patients, relatives or health care staff.</p>	Not Answered		<p>This survey seems to be biased in the fact that the questions more or less say assisted dying is a good thing. To answer all the questions would suggest that you agree with it.</p> <p>For example question 25 asks should a healthcare professional be with a person who takes medication till they are dead. If you tick one of the answers it suggests that you agree with assisted dying.</p> <p>I would like to know who drafted this survey! It just talks about the person's right to decide to end their life. There is no provision for family to have an input into such an enormous decision or thought given to the impact it would have on their life and mental health!</p> <p>I have personal experience of a relative suggesting a patient should be " helped " to die. This patient lived happily for a couple of years.</p> <p>Bringing in assisted dying is a very dangerous path to tread! The law should protect life! To change it for exceptional cases is to make bad law.</p>
Agree	<p>It's in humane to keep people going ,when there is is no quality of life.</p>	Not Answered		

Disagree	Undermining the trust of some disadvantaged groups in healthcare professionals	Not Answered	
Disagree	<p>My strong faith is one main reason but having worked in the care system both in the UK and on the island - too many people could very easily be persuaded to make such a decision - for all sorts of reasons. Family pressure; perceived notions of being a burden; financial needs; When you work with people who are dying - so many different factors come into play and most importantly are not necessarily monitored closely enough. Pressures build up that often are not foreseen and the person who is most affected is the one who is the focus of a discussion regarding assisted dying. My personal experience has taught me that because of this - I would not trust a system that is already broken by financial constraints; by underpaid over worked staff; by exhausted care givers ... the safety net for those whom this bill is hoping to 'help', has too many holes that allow those who are vulnerable and those who are elderly - to fall through.</p> <p>I vehemently oppose the passing of this bill.</p> <p>I won't answer number 9 as it implies that I agree with this limit.</p>	Not Answered	<p>This survey is more aimed at someone who agrees with the idea in the first place. Most of these questions assume that the person agrees.</p> <p>Rather poorly thought out in my opinion.</p>
Agree	<p>People who are terminally ill should have the chance to choose how to die and minimise their pain and suffering. No other human has the right to dictate this,. In particular religious groups should have no say over the life of people that may not even share their religion.</p> <p>Other countries have in place safeguards and those could be replicated on the IOM.</p>	Not Answered	<p>The decision to have an assisted death will never be easy for the person or their loved ones. Therefore the process must allow people to be supported to access the process at all stages. Not having family/friends to support must not be a barrier.</p>
Agree	I fail to see why we make humans suffer right through to the end of a terminal illness, sometimes with great distress and pain. I recognise the difficulties surrounding legislation in this area but it should not be beyond the 'wit of man' to change laws that protect us as individuals from a horrible end.	Not Answered	
Agree	Control over one's death and its timing	Not Answered	
Agree	To alleviate suffering in patients with terminal illness	Not Answered	

	<p>Disagree I fear that it will become such common practice that people will start to think it is almost what they should do. That if they in any way feel like a 'burden' they will feel pressured into it.</p> <p>I really do not think people should be making such a final decision at such a vulnerable time. This is putting death and a 'way out' at the forefront of people's minds, where it may never have been considered previously.</p> <p>To me this is not assisted dying, it's assisted suicide. I fear for the medical staff who will be asked to do this and what it could do to their mental health. There is also the fear of it being open to abuse and altering the general psyche towards serious illness. Have medical staff on the Island been consulted?</p> <p>Of course I have sympathy for those who are suffering, but I really do not think this is the right thing to do. I hope our beautiful Island does not go down this very sad route.</p>		Other	Do not agree to it at all.	
	<p>Disagree As a christian I don't believe anyone has the right to take another's life. This puts christian doctors and nurses in a difficult position. But I do accept that I wouldn't allow any of my pets to suffer prolonged illness and pain if death were inevitable.</p> <p>I would accept the increasing doses say, of morphine, in the case of cancer and acute pain, to the point where it might be arguable the morphine rather than the cancer could be held as the final cause of death.</p>	For over 5 years			<p>Very very strict controls if this becomes law to protect vulnerable elderly people from coercion by younger relatives (for obvious reasons).</p> <p>Very very thorough discussion and assessment of any person considering assisted dying to be sure of their motives and intentions. It has been known for people at the end of their tether, attempting suicide but being saved 'by accident' who later find means to cope. People who are seeking assisted dying may have made other choices if given longer or other reasons for continuing to live had been made evident to them.</p>
	<p>Agree If I found myself in the situation of being terminally ill, I believe it would be my right to choose when I end my life and how, particularly if my illness was impacting on my quality of life and my day to day living. Of course, no-one wants to feel they are a burden to their family, this is no reason to consider assisted dying, in fact I know that my family would not make me feel that I was a burden on this situation. I currently have lots of health issues, not life threatening, and my loving family are a great support to me now, and this would continue should I become terminally ill in the future.</p>	For over 5 years			

Disagree	<p>I have great compassion on those who are suffering but I don't believe it is safeguards will be upheld, we can see how other laws start well but gradually get worn away. It's detrimental to the patient doctor relationship. I don't believe this would ONLY be for the extreme cases.</p> <p>The elderly and the vulnerable people in our society are exploited and abused to a frightening extent already.</p> <p>Only those who choose not to see the future would support this bill.</p> <p>I do not agree that the follow questions allow for those of who do not agree with this bill so I will not answer them</p>	Not Answered	
Disagree	<p>Disagree.</p> <p>This survey is biased in its construct. The questions are biased in nature and clearly written by the parties proposing this bill.</p>	Not Answered	<p>These questions have started with the assumption of agreement. They could have been written by a child _ so is the poor statistical construct.</p> <p>Shame on you for allowing such a weighted survey on so great a matter.</p>
Disagree	<p>We have too many vulnerable people on the island who would push to have this extended to their wants and needs. Once you open this a crack, it will get bigger and bigger. It sounds okay in principle to help those who are terminally ill but it will not remain so. Looking across other countries who have legalised this, it has just grown wider and wider. Where does it end? If a 15 year old child comes to you who has had severe mental health problems for years and tells you they want to die, what will you do then? Are you going to help the child or offer them death as an alternative because that's where this will end up. Is the government going to stoop so low as to offer death to a child because it's easier than trying to find a way of helping them with their mental health problems?</p> <p>I know, people will say "This is not what this will be used for." Countries who have legalised assisted dying have HAD this come up and have legalised this! You cannot put boundaries on this type of legislation. It will get bigger and out of control.</p> <p>It is not necessarily a peaceful death that someone will experience. We've heard horror stories about prisoners in American being given lethal injection and it hasn't gone to plan. It is not necessarily peaceful. It can go wrong.</p> <p>Don't get me wrong, I understand why someone would not want to live til the bitter end of a terminal illness but this cannot be legalised due to the repercussions.</p> <p>I, myself, have mental health problems - this will grow to affect those with</p>	Other	<p>I don't agree with this at all.</p> <p>My dad is currently terminally ill with liver cancer. He has less than a year. I still don't agree.</p> <p>I don't want to see him suffer, no, but the repercussions of legalising this are huge. This is utter madness. How do you expect to control this? It would be impossible to control. You cannot possibly monitor this on an island. Every one knows each other. There could be pressure from family and friends to get someone to end their life because it's easier.</p> <p>Doctors who KNOW their patients as friends, and there are many, are going to allow the death of a friend because they are obliged to as a friend. It may not be because of anything to do with their health, just because their friend wishes to end their life. There are SO many reasons this should NOT go ahead.</p>

Agree	I believe that people should have sovereignty over their own bodies and what happens to them. If death, pain and suffering are the inevitable outcome of a diagnoses I believe that people should have the choice to opt out. I think this option could not only avoid trauma and indignity for the individual but also for their loved ones.	Not Answered	I wonder if a system, much like when we when we fill out a driving license application, that asks us if we are happy for our organs to be used for science should we die, could be used in this scenario? Somewhere we are able to register our wishes from 18 onwards, that is easily accessible and can be changed at anytime. With relevant safeguarding in place to ensure any changes are made by the individual. Such as the proposal of meeting with two doctors outlined above.
Agree	This seems a compassionate path in the face of unbearable suffering; especially so if the individual has no reason to believe the suffering will be alleviated and may, indeed worsen. I understand that this will be a very difficult decision, especially for family and loved ones and for anyone who has not experience terrible, ongoing pain and/or catastrophic deterioration in quality of life. I appreciate that a number of people believe any life must be allowed to continue. I can also see how there is a valid concern that people could feel pressurised to accept assisted dying, to lessen the burden they may believe they are. This is why it is important to have to determine measures and safeguards that ensure plenty of opportunities for an individual to change their mind and speak privately and honestly about fears and concerns. I don't believe many people, even with a terminal diagnosis, will find this decision anything other than terrible - it is certainly not an easy option, for anyone.	Not Answered	If the bill is accepted, there must be robust protection for the healthcare workers involved in the process. No healthcare professional should feel obliged to be part of someone choosing to die if they have strong reservations. Anyone who has been involved, must be able to change their mind at any time. It might be necessary to protect the identity of the doctors asked to assess the patient in any individual case. There must be very clear process to ensure no one person is making a decision they are not comfortable making. If a psychiatrist is given the responsibility of deciding, when two other doctors cannot agree, this may encourage the initial assessors to pass on that difficult task to the psychiatrist. When the patient is unable to communicate a wish and has left no instructions, there is need for clear criteria to assess quality of life, which, of course, is subjective. If, for instance, the patient can breath unassisted, but not eat or drink, life can be sustained for several years. It can be very difficult to assess suffering in these situations. Involving the family in the decision in these cases would seem helpful. Indeed, I would hope that families are an intrinsic part of any decision-making when the patient is unable to do so. The experience of staff at centres that already permit assisted dying could be very useful in developing a list of criteria helpful to those of us still debating whether this is right for our community.
Disagree	Ok so got a leaflet in the post about assisted suicide and I'm sorry I don't agree. I think the person who wants to go should have a choice in the matter. If I was dying from something agonizingly painful in a hospital bed I would want my family to accept my wishes of passing away and I'm sure there are others out there who feel the same way.	Not Answered	
Disagree	My understanding is that the Hospice take good care of people close to dying, with aid of pain relief. This is exactly what happened to my father, he went to hospice due to liver cancer, they spotted he was close to dying, gave him a injection and that was that, he didn't speak again and died peacefully less than 24 hours later. I know of people who have actually been told they have 6 months to live and also less than 12 months to live, they are still alive 18 and 12 months on. Doctors don't always get it right, they do the best they can.	Not Answered	
Disagree	I don't think it is needed and the risks of its introduction far outweigh any perceived benefit. Good palliative care is what is required.	Not Answered	

Disagree	<p>1. It is morally wrong. Life is a gift from God and is therefore not ours to take.</p> <p>2. It is ethically wrong. The role of doctors is to treat illness and relieve suffering, not to kill their patients. It would be bizzare (and somewhat disturbing) to see 2 almost identical patients with pneumonia on a ward round, and to be discussing life-sustaining treatment (antibiotics, etc) with one and a lethal injection with the other, without prejudice, as if the decision was morally neutral.</p> <p>3. It is unnecessary. Most suffering can be relieved with good palliative care and family/community support. In my experience sustained desire to die is very rare (I can only think of 4-5 patients in a 17 year career thus far). Therefore any change to the law is to accommodate a very small section of society (but at the potential expense of a much larger section of society when we consider potential risks/collateral effects).</p> <p>4. It is uncontrollable. Many patients will feel pressure to die because they feel to be a burden on others, or because the option is presented to them as reasonable, when they actually wish to go on living. Killing patients is (practically) easier than treating them - thus euthanasia will be a cheap/easy 'healthcare option' for a pressured healthcare system to use. There are no safeguards that will prevent euthanasia becoming freely open to anyone who requests regardless of their diagnosis, prognosis, or any process of exploring alternatives - it will become an easy choice for anyone. The proposed safeguards regarding prognosis, diagnosis and autonomous desire for death are all vague, with arguments that suggest they are discriminatory. For example why should someone with a prognosis of less than 6 months be eligible, but not someone with a prognosis of 9 months (and we as healthcare professionals are not very good at distinguishing</p>	Other	2 years	<p>1. It is morally wrong. Life is a gift from God and is therefore not ours to take.</p> <p>2. It is ethically wrong. The role of doctors is to treat illness and relieve suffering, not to kill their patients. It would be bizzare (and somewhat disturbing) to see 2 almost identical patients with pneumonia on a ward round, and to be discussing life-sustaining treatment (antibiotics, etc) with one and a lethal injection with the other, without prejudice, as if the decision was morally neutral.</p> <p>3. It is unnecessary. Most suffering can be relieved with good palliative care and family/community support. In my experience sustained desire to die is very rare (I can only think of 4-5 patients in a 17 year career thus far). Therefore any change to the law is to accommodate a very small section of society (but at the potential expense of a much larger section of society when we consider potential risks/collateral effects).</p> <p>4. It is uncontrollable. Many patients will feel pressure to die because they feel to be a burden on others, or because the option is presented to them as reasonable, when they actually wish to go on living. Killing patients is (practically) easier than treating them - thus euthanasia will be a cheap/easy 'healthcare option' for a pressured healthcare system to use. There are no safeguards that will prevent euthanasia becoming freely open to anyone who requests regardless of their diagnosis, prognosis, or any process of exploring alternatives - it will become an easy choice for anyone. The proposed safeguards regarding prognosis, diagnosis and autonomous desire for death are all vague, with arguments that suggest they are discriminatory. For example why should someone with a prognosis of less than 6 months</p>
Agree	I am terminally ill myself and believe that having this facility in place would enable me to concentrate on living rather than worry about how I am going to die and the affect on my family	Not Answered		
Agree	If I had a pet in distress at the end of its life I would not hesitate to have it painlessly 'put down' by a vet. I just want the same opportunity to be available to me.	Other	We don't want to establish a Dignitas tourist trade as in Switzerland.	
Agree	having seen a friend in the later stages of his illness assisted dying would have saved him considerable pain and suffering and myself i am diagnosed with prostate cancer which is incureable and if i got to the stage where it was insufferable i would want to have assisted dying available	For over 1 year		
Agree		Not Answered		

Agree	During life, as patients, we are free to be able to discuss and make informed choices about our care options with HCPs before, during and after medical interventions. Indeed it is incumbent upon the HCP to involve and inform the patient in all aspects of their medical care. In life, death is a certainty and I believe that as in any other condition, a patient should have the legal choice to decide that an assisted death is a preferable care option in the event of foreseeable end of life as a result of that condition. So, in principal, I agree.	Not Answered		The patient, having been assessed as having capacity to make a decision to opt for an assisted dying as part of their care program, and thereby being required to sign the declaration, countersigned by two qualified doctors and a witness, should also have the ability to state the circumstances of their assisted dying - who should be present (or not), where it will take place and when. I would also expect the law to require any HCP assessing the patient to have capacity to make the decision to end their life, to have undertaken specialist training. I think there should be a limit to the number of doctors on the island with the legal right to sign the declaration and that doctors who apply to be able to provide this medical consent should clear a suitable screening process.
Agree	In my view it is a question of personal choice and affording people the option of dignity.	For over 5 years		
	If someone is mentally capable of making an informed decision, then it should be their decision to make.			
Agree	Having watched both my grandparents die from cancer and my father in law lose himself and then eventually pass away from dementia. On I have their pain and suffering	For over 5 years		
Agree		Not Answered		Re Question 20 & 21, there is an unfortunate link between these two questions. I do not believe that the additional 14 days reflection time would be necessary following consultation with and agreement by two doctors. A person will be sure of their decision before even the consultation stage. Any period of reflection should be a concern for the person themselves, rather than have an arbitrary limit imposed by the state. A 14 day delay may in some cases be unnecessarily prolonging the suffering of a person. Having answered no to Question 20, none of the options available in Question 21 make sense. However, if support for a 14 day period of reflection is overwhelming, then I would suggest that I would support the reduction to 7 days for those in the last 30 days of a terminal illness. Preferred option for me would be leave it to the person to decide what period of reflection they require.
Agree	I think it is inhumane to keep people alive against their wishes. In cases of severe pain we would prosecute people for allowing animals to be kept in such a condition. Why would we allow the same for people?	Other	I don't approve of the need for termination tourism, but I think it immoral to deny others just based on residency.	
Agree	I know that if I was terminally ill and not able to function properly, being a burden to loved ones or in unbearable pain, I would want to end my life my way and in my time.	For over 5 years		

Disagree	I do not want to live in a society which normalises suicide. Once we open the door to this the 'safeguards' will be open to change according to the flexible whims of our culture. I.e. 10 years from now the discussion will be whether the 6 month life expectancy rule is necessary or do we even need to be terminally ill. As soon as we start making choices regarding ending our lives it blurs the once very clear ethical line. But however much you want to blur the line, as soon as we take an action which ends a persons life, it becomes killing. I fully sympathise with the reasons for wanting to mercifully end someones life, but in our twisted and selfish culture 'mercy' could easily become a disguise for convenience and I don't have any confidence in a changeable human system of 'safeguards' to be able to discern the difference. I do believe people guilty of mercy killing should be treated with compassion and leniency, but I do not think that it should be legalised and provided for by the state. If someone must be willing to break the rule of law in order to assist in a loved ones suicide, that I think is the best safeguard.	Not Answered	As mentioned above, I strongly disagree in permitting assisted dying. I have either skipped questions above because I there was no satisfactory option or else have chosen the most limiting option, but this is in no way indicating any support for it.
Disagree	Since I was a young child, I have strongly felt that it is my body and my life and I should have the right and the freedom to die when the time is opportune. Assisted dying is the humane way to pass and is kind to one's family.	Not Answered	Re paragraphs :
Agree		Not Answered	9. No limit on life expectancy
			15. Meet with 2 doctors NOW, not at the end of life
			19. Signed by ANY 2 doctors.
Disagree	I disagree because it is only God who has the right to determine when our lives should end - not we ourselves. I am also worried that this bill will, in time, open the door to a host of unforeseen problems, including the coercion of the vulnerable, the normalisation of the taking of human life, the reduction of funding for palliative treatments and services, and the expansion of the inclusion criteria to embrace many different patient groups besides the terminally ill. It is a dangerous proposal and the wrong pathway for the island to be taking.	Not Answered	

Agree	<p>Having seen many friends and been with close relatives who have suffered and died from terminal illness, the current medical and palliative care options are woefully inadequate in preventing the prolonged pain and suffering that many have to go through in the last few weeks/months of their lives.</p> <p>A close relative's prostate cancer eventually spread and lead to tumours in the collar bone, spine and lungs. In the end he couldn't lie down because of physical pain from the tumours on his spine and his lungs could only inflate sufficiently to breathe if he was sat bolt upright 24/7. He had a morphine syringe driver that would allow him to administer the maximum amount of pain relief every 4 hours, but in the last couple of weeks, he wanted to administer the full day's amount at once, because he was in so much pain. This was heartbreaking just to watch, let alone put up with.</p> <p>If I ever get to that position, I do not want to suffer for days or weeks and I don't want my family to be burdened or traumatised by watching me suffer, as I have experienced on several occasions with relatives, friends and colleagues.</p> <p>If I am ever diagnosed with Motor Neurone disease, I do not want to get to the point where I can't move/communicate and have to be fed with a spoon by others and have all my toilet activities attended to. That is no life for me or the family/nurses who would have to attend to my needs - I would want the option to depart this world at a time of my choosing. And I am a Christian and regular churchgoer ! Hopefully, God will forgive me through my faith in Jesus Christ, who died for me !</p> <p>Dementia is another issue that has affected my wider family and again it is heartbreaking to witness this. Although there is generally no physical pain attached to this, the individual ends up being a mere shell of a person, with</p>		Other	<p>If someone brings over an elderly relative who is ill, so that they can give them more attention/care whilst maintaining their own job and family matters here on island, then if that elderly relative's illness is, or becomes terminal and they want to end their own life, it shouldn't matter how long they have been a resident here before they can apply for assisted dying.</p>	<p>I'm not sure that everyone applying for assisted dying would be comfortable with the provision of drugs to be taken at home. What if they are unable to swallow/digest the pills/quantity of pills required at the time they decide they want to depart this life ? Shouldn't there be an option for an end of life room to be available in a healthcare/ hospice setting which the family could hire, or take their relative to, so that there could be a doctor or nurse to oversee the administering of the drug (or maybe an injection if the recipient/family preferred this), so that any medical complications, like physically being unable to drink/swallow the tablets, or involuntarily regurgitating them immediately afterwards, could be dealt with ?</p> <p>Could there not be an alternative of an assisted dying injection overseen by a medical professional, who could insert an iv catheter into a vein and set up the injection ready for the recipient or family member to administer ?</p>
Agree	Autonomy, justice, compassion		For over 1 year		
Agree			For over 1 year		
Agree	<p>It should be possible to decide when you wish to die if you are suffering, and have no prospect of recovering.</p>		For over 1 year		<p>there may need to be some detail revisions to take into account people so disabled they may not be able to physically sign documents... verbal (recorded) wishes might suffice, or a filmed interview, showing the person's responses.</p>
Agree	<p>I believe that those who have capacity, have been given all the information and the prognosis of a terminal, extreme life limiting disease that in its end is terminal (especially if it has high pain/ mental health issues that does not affect capacity) should have the right to look at options for controlling their life. If it be to continue or end true person centred care will take into consideration an individual's wishes. When people make this choice they do for themselves and the effect of illness on them not because of the illness as a group.</p>		For over 1 year		
Disagree	<p>It's against my religion</p> <p>Question 9 gives no options for none. Am a Roman Catholic and do not believe in assisted suicide</p>		Not Answered	<p>Ffs what a stupid insensitive question who made up this ?</p>	<p>I think this is unthinkable and totally unethical. As a catholic I will never agree.</p>

Disagree	<p>We should be majoring on palliative care for individuals who are struggling with ill heath / terminal illness. Many have treatments which extend life. Who are we to take these decisions.</p> <p>It is the thin edge of the wedge. You may want to introduce safeguards but from experience I other jurisdictions these are changed and manipulated. This is assisted suicide</p> <p>We should be improving our hospices and spending money on research for better and improved palliative care. Hospices are not government funded. They should be.</p>	Not Answered	Not applicable do not agree with it at all.	<p>I have not replied on many of these questions because I find them deeply disturbing. I don't agree with this at all and answering the questions drags me into the decisions.</p> <p>We are a nation of proud people who in the main respect one another. Look after us with palliative care in our hour of need instead of assisted suicide.</p>
Disagree	<p>The ending of a human's life by another human should forever remain illegal. Otherwise, the regulations and lines will inevitably become blurred overtime. Just like they are becoming blurred in Canada with them set to allow assisted dying for the mentally ill. Including children.</p> <p>I would also like to add that the following questions do not have sufficient options for those opposed to assisted dying.</p>	Not Answered		
Agree	<p>In 2018 my grandfather was diagnosed with late stage aggressive cancer. He became hospitalised and after day of not eating or drinking as he couldn't feed himself, he was put into the liverpool care pathway. This went on for a further 3 days where he was not allowed any food or water. We had to watch and were not allowed to provide him anything other than a damp sponge to moisten his lips. The process was torture and led his loving family to wish his death to end his suffering. It seems madness that assisted dying cannot be allowed when the LCP exists and is of itself a version of assisted dying but far far more barbaric and inhumane.</p>	Not Answered		
Agree	<p>People should have control over their end of life.</p>	For over 1 year		

Disagree	<p>Based out of my faith, I do not believe that medical professionals, let alone those not medically trained, should be able to promote ending life in any way.</p> <p>I believe that changing the law is the start of a downward spiral of devaluing people and the gift of life that we all have.</p> <p>I believe that there are examples around the world, such as in Canada, where the laws around "assisted dying" have been increasingly stretched, and that opening up the law in the first place allows there to be more opportunity for people to interpret this in different ways which can lead to...</p> <p>...An Increase danger of abuse - Those who are generally more vulnerable, including disabled people and those who have other personal and mental health issues, may not be respected. I am concerned that society's view of people with various difficulties generally could impact negatively on these vulnerable groups when it comes to any decisions that may be subsequently allowed to be made by the approval of this law.</p> <p>Pressure - If the law allows "assisted dying" in the future, there may be more pressure felt by those who are at the later stages of life not to be "a burden" to those around them. If there is not an option for this, the pressure will not be there, but I believe that any decision to introduce law around this would also bring up issues around decisions being made in order to meet the carers needs, rather than the person's.</p> <p>Normalising suicide - There is already an increased suicide risk for those who are depressed, or with other physical or mental health issues. I believe</p>	Not Answered		<p>I know that there is always an alternative to "assisted dying", or what I would suggest is more accurately titled: physician assisted suicide.</p> <p>The human race has generally sought to support life, promoting healthy lifestyles, positive mental health, developing medication to end/alleviate illness, suffering and pain, and it is my perspective that to open the door to legalising the support/facilitation of death is NOT what I want our government to do.</p>
Agree	<p>I witnessed my mother suffering a painful and undignified death begging to be allowed to “go” when she was still coherent enough to do so.</p>	Not Answered		<p>Written consent and its ilk are all well and good if cognitive capacity is still mounted by the person.</p> <p>Toward the day end, this would not have been available as an option to my mother who was not capable of feeding or drinking for herself.</p> <p>Requiring a signature at this stage would negate the whole purpose of the entire bill.</p> <p>If the option is available at an earlier stage via a proper and open conversation, that might help.</p> <p>To leave someone in medical limbo as they are incapable of a signature would be a betrayal of the whole concept.</p>
Disagree	<p>Do not resuscitate (DNR)and palliative care should be fully explained in a leaflet and delivered to all households. Just like the Assisted Dying leaflet. This will enlighten folk to the caring controlled way available when dying naturally in a loving safe environment. It should be explained in such a simple way that non medical people can understand.</p>	Not Answered	12.13.14 are not relevant if do not agree	<p>There should not be a draft bill, this law should not be considered. However people have committed suicide when in despair but many are glad they didn't succeed when mental healing happens.</p>

Disagree	<p>There is always hope for terminally ill patients to survive. Palliative care is available and provides the the support needed for those in their care. The power this bill will wield could be abused by those who wield it against vulnerable people. There can't be a guarantee that this will never happen. The surveys line of questioning is favourable to euthanasia and therefore biased. I cannot answer some questions as they don't allow for other answers.</p>	Not Answered	<p>No one should be euthanised.</p>	<p>It will be an offence to provide Euthanasia services of any type on the Isle of Man. An offence will be liable to a fine of no less than £50,000 and 6 months imprisonment.</p>
Agree	<p>A person who is in weeks of slipping away should be allowed to die feeling in control.</p>	For over 5 years		<p>The person wanting to die has to ask about it, not prompted by health care. Maybe it should read those receiving end of life care, have to raise the matter when starting that last journey.</p> <p>If this is such an important matter, should it be an island vote and it has to have 60 % turn out with a 60 % for allowing early death. Not just based on a survey making a decision based on those that only answered a survey and tynwald voted on.</p>
Disagree	<p>Assisted dying, or Physician Assisted Suicide, is contrary to the Christian view of the sanctity of life. Life is not ours to take away or to end.</p> <p>Physician Assisted Suicide would be open to abuse and would impose undesirable pressure on individuals, families, carers and physicians faced with having to make decisions that are not theirs to take.</p> <p>As statistics from the Netherlands, Oregon and Canada show, the legalising of Physician Assisted Suicide is the 'thin end of the wedge', with numbers increasing consistently.</p> <p>Palliative Care is about the relief of pain, holistically, and is a tried, tested, trusted and proven alternative. Moreover the Isle of Man has a Hospice service which is the envy of the rest of Europe, and the service should be nurtured and supported to enable palliative care in the Island to be maintained and further developed.</p>	Other	<p>I do not agree with the legalisation of assisted dying, so questions 9,13 & 14 do not apply</p>	<p>Several of the questions above seem to assume the respondent supports the proposal.</p> <p>There needs to be an 'N/a' option to ensure accuracy of representation. In these cases I have generally answered 'not sure', but this is not provide my strictly accurate views.</p>
Agree	<p>When someone is facing a terrible, certain death and want to spare themselves and their loved ones from going through this, they should be allowed to choose to end their own life and, if they need help, someone should be legally able to help them to do this.</p>	Not Answered		
Disagree	<p>We are not entitled give ourselves the power to terminate life. It's crossing a dangerous threshold we need to step back from</p>	Not Answered		<p>I'm very concerned that legalising the termination of people is giving a dangerous power to us which can be misused if given to the wrong people. You may think it ethical and good now, but who will be in power in 10, 20, 30+ years time? Do you trust future generations with this new legal right? Personally I do not. Look at the example of the Nazis who started the Holocaust with just a small euthanasia program for the disabled. It snowballed, and that same evil is a danger which is always with us.</p>

Agree	I think everyone should have the option to end their life in a peaceful way if they so wish.	Not Answered	
Agree		For over 1 year	I don't think that the opinion of 2 medical doctors is sufficient. The law should mandate to have a 3rd person, the person's advocate, to confirm his intention of dying.
Disagree	<p>Assisted dying is a euphemism for assisted suicide. I have known and loved people who have had a terminal illness and every moment with them has been precious and they have felt the same way. It is imperative that in such circumstances the patient is comfortable and pain free - and I believe that is where society's energies should be directed. The focus on outstanding palliative care, so that people can live as well as possible with a terminal diagnosis, is imperative.</p> <p>The risks of passing this bill is that not only might terminally ill patients feel under pressure to opt for assisted suicide in order to spare their families the pain of watching their illness progress, in certain instances they might feel actively pressured by their families to adopt this path. With the pressure on NHS and social care resources there is also the risk of other factors at risk of coming into play, however unconscious.</p> <p>If the argument is that terminally ill patients cannot face the prospect of the progression of their illness then if they knew that there was excellent palliative care to support them and their families, then the prospect would be less terrifying and they would recognise that there was more time to spend with their loved ones. It is notable that the excellent care provided by the hospice movement is not Government funded. It would seem a more appropriate direction of everyone's energies to put pressure on the legislature to make adequate provision for the level and type of support that is needed rather than seeking to eliminate those who need it.</p> <p>The issue of what is described as 'unbearable suffering' is indeed a painful one. It cannot be impossible - when the world can perform all kinds of</p>	Not Answered	For the reasons outlined in some depth at point 8, I am wholly opposed to the introduction of this draft Bill.
Disagree	I believe life to be sacred.	Not Answered	
Agree	After nursing a close relative in the last stages of cancer the pain, fear and emotional torment they endured was inhumane, their choice was of a calm, pain free death , this did not happen.	Not Answered	The individual concerned should have the final say in how and when the medication is administered and who is present. If this option would have been available to my relative our family would not have had to see them in such terror as their heart started to fail and their body started to fill with water, it was the most distressing event I have ever experienced to see my relative so distressed and fearful.
Agree		Not Answered	Most of these questions are closed when they need to be open questions, as many of these are dependent on each individual circumstance.
Disagree	Broadly speaking I am against the taking of any human life. Otherwise my concerns that if this bill is passed, the floodgates will be opened and assisted dying will become the norm.	For over 5 years	
Disagree		Not Answered	
Agree		For over 1 year	
Agree	It is the fair thing to give people who are suffering an option.	Not Answered	

	<p>Disagree</p> <p>In countries where assisted dying - also called assisted suicide - is legal it is evident that it cannot be controlled. It may start with limits, but then they are extended to an increasing range of situations affecting the sick, the disabled, the elderly - especially those with dementia - and other vulnerable people who may be pressurised into asking for assisted suicide. If they are unable to make decisions, others who may have financial motives, or wish to be rid of a burden, can decide on assisted suicide for them. For example, in Oregon, vulnerable people fearing becoming a burden is a major reason for assisted suicide decisions, rather than physical suffering. Many disabled people fear that it will be extended to include them..</p> <p>Safeguards have been overridden, ignored or removed in countries with assisted suicide laws. Canada is introducing assisted suicide for those with mental health problems. In Belgium and the Netherlands disabled infants and dementia patients are euthanised. Assisted suicide undermines palliative care and is increasingly seen as an alternative to it, even though palliative care can reduce pain and improve quality of life, making assisted suicide unnecessary.</p> <p>Furthermore, legalising assisted suicide encourages suicide generally. In the USA. a 2015 study revealed that it was linked to an overall increase in suicide of 6.3% and a 14.5% increase in the over 65s.</p> <p>I can also speak from personal experience. I have had cancer myself, and for 12 years helped at a hospital support group, where we gave each other great encouragement and love. Many of us died in that time and I saw how palliative care can give a good death. For example, a dear friend at</p>		<p>Other</p> <p>For as long as possible. If this law is passed, this will deter suicide tourism and suicide migration, as well as giving plenty of time for decisions to be made.</p>	<p>Since I am completely against assisted dying, I consider this Bill to be unnecessary. Investment should be made in palliative care. It is significant that in a BMA survey of 2020, over 80% of doctors in palliative medicine would be unwilling to be involved in assisted suicide, should the law ever be changed. I agree with these professionals and support the law as it stands.</p>
<p>Disagree</p>	<p>I have relatives who have suffered indignity and no quality of life for many years. One who kept asking for a gun to end the misery they experienced.</p>	<p>Not Answered</p>		
<p>Agree</p>	<p>Yes. Assisted dying should be allowed.</p> <p>Palliative care in its existing form is not acceptable when the person in question has no quality of life.</p>	<p>Not Answered</p>		<p>I feel that this survey is only dealing with the end of the process.</p> <p>I would like to see the introduction of specialist end of life teams who meet with the patient once they have been informed that they have a terminal illness or are going to have to live without any quality of life.</p> <p>I have nightmares about one of my relatives who I was unable to help and he had to die in excruciating pain and misery having spent three years with no quality of life unable to leave his room or home. He was a proud man who lost his dignity and self respect during his last years and I am in tears whilst writing this because I feel so guilty about not being able to help end his misery.</p> <p>Please please please give hope and dignity to those in the same position.</p> <p>As mentioned before palliative care is extremely outdated and is causing extreme suffering to those who are nearing the end.</p>

Disagree	<p>All life is precious.</p> <p>Despite public arguments that PAS is needed to avoid excruciating pain and other symptoms, the reasons attributed to patients who seek PAS are not uncontrolled symptoms but lost autonomy, independence, and control. Some cancer patients may make erroneous assumptions, like, “No one can help me” or “No one understands what I am going through.” Such cognitive distortions may respond favorably to cognitive behavioral interventions and potentially avert or abort a request for PAS. Indeed, it has been found that “Requests for physician-assisted suicide are unlikely to persist when compassionate supportive care is provided.</p> <p>Most suicidal people do not want to die. They are experiencing severe emotional pain, and are desperate for the pain to go away. I would suggest that the same may be said of at least some individuals with cancer who seek PAS.</p> <p>Proposed changes may also weaken the motivation and rationale for suicide prevention, during a period when suicide rates have been rising. Legalizing physician assisted suicide "PAS" has been associated with an increased rate of total suicides relative to other [non-PAS] states, and no decrease in non-assisted suicides.</p> <p>Efforts to promote PAS would be better directed toward destigmatizing the mental illnesses that underlie the majority of suicides and toward bolstering the availability of state-of-the-art palliative care.</p>	Other	<p>I do not agree under any circumstances</p> <p>We must care for the dying, not make them dead.</p> <p>Physician-assisted suicide is neither a therapy nor a solution to difficult questions raised at the end of life. On the basis of substantive ethics, clinical practice, policy, and other concerns, I do not support legalization of physician-assisted suicide</p>
Agree	<p>Having experienced my father dying slowly and painfully from cancer of the lymph gland (Hodgkins lyphoma) I am sure that he would have preferred to have had a more dignified way of dying.</p>	Not Answered	<p>The bill should include dementia where the degree of dementia has reached the stage where the patient is totally lost to the ailment. The persons quality of life is non existent.</p>
Disagree	<p>Terminally ill adults, like most patients, should be supported in their hour of need in a holistic way.</p>	Not Answered	<p>No doctor can predict how long someone has got to live.</p> <p>Money should be spent on health care not death care!</p> <p>This debate is one sided, biased towards encouraging people to support assisted dying with no regards to the current evidence on the matter from around the world.</p> <p>This is not the time for this debate and the resources should be used for common, and pressing needs of most people.</p> <p>I do not wish this bill brought forward to the parliament. I request our MHKs vote it down.</p> <p>I did not answer many questions because I am fundamentally against assisted dying supported in law. People should really be supported in their last days with dignity, comfort and respect.</p>

Disagree	<p>I was raised and schooled on the Isle of Man and did a stint of my nursing training on the Isle of Man and now work in an ICU in Edinburgh. This has been a topic that I have done some considerable thought on and I do not believe we should change the law of assists suicide in the Isle of Man. I believe the law is the safeguard for many people. If it was introduced I believe that many vulnerable people in the UK will face pressure to end their lives, that is a slippery slope and it could never be introduced in a safe enough way.</p> <p>Dr Sleeman asserts that: Any benefits which may arise from legalising euthanasia or assisted suicide would be limited to a relative few in society Changing the law would lead to a profound cultural shift in people’s behaviour, putting countless people who are vulnerable at risk Those who are weakest and frailest will be made to feel a burden and then their “right” to die could quickly become a duty to die.</p> <p>In recent months, we’ve seen one disturbing report after another coming out of Canada detailing the hardship suffered by citizens who felt they had no other choice but to apply for euthanasia because the alternatives – e.g. the prospect of homelessness, living with chronic pain or mental illness etc - had become too much for them to bear.</p> <p>Jennyfer Hatch thought, 'Goodness, I feel like I'm falling through the cracks so if I'm not able to access health care am I then able to access death care?' And that's what led me to look into medical assistance in dying (MAID) and I applied last year.</p>	Not Answered		
Agree	Forcing people who are terminally ill, who wish to have their life terminated and are mentally capable of making an informed decision, should be allowed to make that decision.	Not Answered		No
Disagree	God gives life, so therefore it is God who takes it away.	Not Answered		
Disagree	<p>There can never be enough safeguards to protect those who feel a burden to others.</p> <p>Having been on a previous House of Keys select committee the evidence presented to us(-it will be available in the Tynwald Library) showed what a minefield this subject is.</p> <p>If the Isle of Man introduced such legislation we would have even more trouble trying to recruit health care professionals.</p> <p>It is clear that wherever safeguards had been put in place where it has been introduced these have been eroded as time has gone on.</p> <p>Once a bill is in place it will of course be easier to introduce amendments to widen the application without reverting to public opinion.</p> <p>This legislation is not compatible with palliative care and would introduce doubt to those coming to the end of their life when they are most vulnerable.</p>	Other 20years		A lot of these questions are not relevant if you are apposed to the Bill- so have been left blank!
Disagree		For over 5 years		
Agree		For over 1 year		

Disagree	I help out with vulnerable adults who find life difficult mentally & physically and the introduction of this bill would suggest to them that life is not valued and that they no longer matter and as such the increase of suicides. I would further add that having looked into this other jurisdictions who have passed this legislation have reduced their funding into palliative care, again suggesting that life is not valued.	Not Answered		I have found a lot of the questions difficult to answer as they are based on the assumption that this bill will be passed, it is a very badly written consultation document.
Disagree	The existing law is safe and protects the vulnerable and disabled, The proposal would have a corrosive effect on health care professionals, eroding trust and virtue, and would devalue human worth. Death is not a treatment and should never replace palliative care.	Other	Life	The very real dangers of this draft Bill to the vulnerable and disabled are manifest in Canada, Holland, Belgium, Washington and Oregon. The Isle of Man's Criminal Law Act 1981 is safe and fit for purpose. This Bill would make unsafe changes to Isle of Man Criminal Law.
Agree	If you allow animal in your care to suffer you could be prosecuted..... how can it be right for the complete opposite of this view be the case for humans?	Not Answered		
Disagree	Human life has intrinsic value, it is not up to individuals to decide for or against living.	Other	I do not agree with assisted dying	The assisted dying law will help people commit suicide.
Disagree		Not Answered		
Disagree	Because human mind/feelings cannot be trusted in this matter. I believe that this is greater than we can understand and act in a correct way.	Other	N/A	No further comments as I am strongly against assisted dying.
Disagree	I feel that allowing assisted dying would be open to abuse, and would make vulnerable people who are a burden to carers feel pressurised into assisted death. As a retired GP I feel strongly that palliative care should be good enough and freely available so that no one need fear dying in pain and distress. Having cared for many people dying at home I feel with sufficient support the last few days of life can be a precious time for all involved	Not Answered		I feel that this survey is grossly biased towards support for assisted dying. All the questions after question 9 are irrelevant to those not supportive of the bill.
Agree	I fully agree that assisted dying should be introduced on the Isle of Man. The guiding principle of such legislation should be that of respect. Respect for the patient; respect for the family and respect for the clinician.	For over 5 years		Whilst in principle I agree with assisted dying and the operative parts that have been put forward in this consultation, there does remain an issue, in my view over the term dying. Whilst in the proposal there is a requirement that the person be 'dying' and have a fixed number of days left of life, there is a level of subjectivity over what the term 'dying' actually means. Of course someone with incurable cancer or a degenerative condition such as Alzheimer's would be medically considered dying as function or structure of the affected tissues or organs changes for the worse over time. However, a person with a traumatic injury or a stroke who has lost function and their quality of life worsens but they are not necessarily 'dying'.

Disagree	I am a medical doctor and Christian. Life is precious. My professional oath is to safeguard life. The ability to predict life's end isn't perfect. Even as a medic we have seen folks defy predicted life outcomes to live full lives. We already have the tools to make terminal events less arduous and more bearable and they do work. Placing these things in a law will tie the hands of medics and create frictions and conflicts with their training professional convictions and most importantly their faith.	Not Answered	This form isn't designed to be objective. It works from answer to question. Once one has disagreed there shouldnt be any more questions needed.
Disagree		For over 5 years	Provide another consultation on the result/outcome of this consultation.
Disagree	I feel it would put pressure on the elderly and vulnerable. Also, I have the old fashioned opinion that it is not up to us when we die.	Not Answered	
Agree		Not Answered	
Agree	I have seen relatives suffer pain and indignity for long periods of time before they died. It is downright barbaric to allow such suffering.	For over 5 years	The process should be open and clearly understood. The patient should be encouraged to ensure that their family is made fully aware of their decision at the earliest opportunity. However, family members should not be allowed to have any say in the final choice.
Agree	People with an illness that is terminal and/or requires them to be cared for by another individual/s should be able to choose whether to live or die. This should also include family m egg movers of those people who have lost their mental capacity through disease, such as Alzheimer’s and/or Dementia.	Not Answered	Considering the family members of those who have no mental capacity to decide for themselves should be given to permit them to make the decision, thus relieving the financial burden from both the state and family.
Disagree	I have real concerns around the Canadian model which started with the terminally ill and now seems to encompass disabled and mentally ill adults. The potential for this legislation to facilitate assisted suicide for more and more individuals feels abhorrent.	For over 5 years	My response to reading some of these questions is quite frankly one of terror and I cannot stress strongly enough how saddened and frightened I would be if this suggested assisted dying legislation were to pass into law.
	I would far rather invest in excellent end of life care through the Hospice System in order to offer dignified, pain-managed end of life care that embraces the value and preciousness of life until it comes to a natural end. I would support any initiative that seeks to make this end of life care more accessible to those who need it.		Please don't allow this legislation which has clearly been demonstrated in other countries to be the 'thin end of the wedge' and could descend into a society who simply terminate life rather than cherish it until it naturally ceases.
Disagree	I do not want the Isle of Man to "normalise" suicide. Whilst I understand the sentiment behind the proposal I feel the introduction of assisted dying would lead to unintended consequences. Such legislation as introduced in Canada started with "terminally ill" and has now extended to "mentally ill". It also puts medical professionals in conflict with their oath to preserve life. Also what happens if someone who wants to end their life is unable to physically administer the medication? This would put someone in the unenviable position of being responsible for ending someone's life. I don't think the consequences of that have been considered. Furthermore if a family member has been granted lasting power of attorney for medical matters would they then be allowed to end the life of another? It is a legal minefield that is too complicated to legislate for effectively.	For over 5 years	Frankly this proposal is dangerous and not appropriate to civil society. It is impossible to control via legislation, open to abuse and likely mishap. Proposing that lethal medication can be issued to members of the public or their representatives with no further control is unthinkable. We are not meant to kill others or ourselves and so it is no surprise that this subject raises issues that cannot be effectively dealt with or adequately managed. We have an excellent system of palliative care which has served us well for generations. Experience shows us that where introduced this type of legislation leads to conflicts of interest, coercion of medical professionals, scope extension and consequently the normalisation of suicide and, frighteningly, the potential "cleansing" of society of those who don't think they want to continue living for whatever reason. Terrifying.

Disagree	I have had personal experience of my terminal ill brother and my mother suffering with Parkinson's disease. i saw them bravely face death surrounded by family, visited by family and given wonderful care right to the very end. i have a concern that introduction for terminal ill or suffering individuals will only be a first step as other countries who started with this tight legislation and safe guarding have widened eg ongoing extension of Canada's euthanasia law, from terminally ill, to chronically ill and disabled, to mentally ill. i have many friends with disabled children and see how hard it is to care for such a child, i have concerns about future changes to ease the decision of just ending the life of such people. as well as the future control of assisted dying I also have concerns of the ethical issues involved and of course how unnessary this bill is when we have excellent health care provisions for end of life care already seen with my mum and brother.	Not Answered	in my opinion there is no need for such a bill, let's continue to invest in our care for the sick and dying, pay nurses, increase facilities at hospice etc and become a island of excellence in the way we care for those who would consider assisted dying.
Agree	Palliative care does not guarantee a lack of suffering or distress, I have just finished witnessing a woman's, who was like a second mother to me, long and painful death from breast cancer, in the last few months of her life, she was begging to die and in the end the pain was I bearable for her despite the best palliative care you could hope for. If we can afford to give pets and other animals we love a dignified death when nothing more can be done for them, why can't we do the same for the people we love?	For over 1 year	To protect the vulnerable, I would like to see an independent panel to act in the interest of any disabled person when undertaking assisted dying so nobody can coerce them into going through this path.
Disagree	I don't think this fringe idea of freedom needs to enshrined in law. There are far more urgent and important matters for us to work on.	Not Answered	Looking through these questions, there is a clear assumption that public are in favour of the bill. I strongly feel that this is not an independently minded survey. Waste of time and resources. I DO NOT AGREE THAT ASSISTED DYING SHOULD BE LEGALISED ON OUR ISLAND.

Disagree	<p>Unfortunately assisted dying does not represent progress in medical care development. While on the surface our natural compassion is drawn to the idea of helping people who are suffering, ending someone's life is not a real solution.</p> <p>I have had family members diagnosed with terminal illnesses who have gone on to live well beyond the expected term given to them and this is precisely because the medical practitioners job was to cure and prolong life. Their mental health at the time of diagnosis was obviously not the best and giving an option of assisted dying during that time is not an act of compassion it is borderline abuse.</p> <p>As a society we have continued to strive for medical advancements and championed the very greatest of medical discoveries however this is not a progressive medical advancement it is a regressive one which I am shocked is even being considered. We should instead be pursuing advancements in care and pain management not opting for quick fixes which go against everything that we have held core within the heart of our medical practices.</p>	Not Answered	<p>These questions are not capable of providing honest consideration of of the reality of what is being proposed, they are clearly designed to be used to forward the Assisted Dying Bill and provide little ability to counter or offer alternative views on the points offered.</p>
Disagree		Other	
Disagree	<p>I am opposed to this proposed legislation because it is dangerous and unnecessary.</p> <p>Once the 'genii is out of the bottle' it is uncontrollable as to where it will go as evidenced by the situation in Canada, where my son and his family live, that has seen the majority of the safeguards, that were put in place when the Euthanasia Bill was passed, eroded so that now assisted suicide has been extended from the terminally ill to the chronically ill and disabled, to the mentally ill.</p> <p>My mother had Multiple Sclerosis for more than thirty two years, when very little was known about the condition and when there was little in the way of drugs to mitigate the side effects. MS is not a terminal illness but there is known cure for it. Throughout her life my mother maintained a positive outlook on life and many people said they always felt better within themselves having visited her. Throughout those thirty two years my mother was cared for by my father, her three sisters and by friends and neighbours. If the experience of Canada, and other countries that have introduced a law to permit assisted suicide were followed, my mother would have been offered it because she would be classified as disabled and she may have felt obligated to go down that route because of the burden caring for her imposed upon those who loved her and yet her contribution to life and the common good of the world was immeasurable.</p> <p>I understood that the General Medical Council's 'Good Medical Practice' requires qualifying doctors to swear an oath upholding several principles of medical ethics that include the principles of medical confidentiality and non-maleficences by having the utmost respect for human life from its beginning to its end and to do no harm. A Bill permitting assisted suicide would be unethical; it would undermine doctors' conscience rights and</p>	Not Answered	<p>As I have already stated, I am opposed to the introduction of a Bill permitting Assisted Dying/Assisted Suicide/Euthanasia for the reasons outlined in Question 8, in particular I am worried by the experience of other countries that have introduced such legislation with so-called safeguards, that have rapidly been dispensed with so that not only terminally people are being offered assisted suicide but the chronically sick and disabled, those who are mentally ill and other vulnerable people.</p> <p>I am opposed to the proposed legislation because those who are dependent upon others to help care for them may feel assisted suicide would mean they were no longer a burden upon family, friends or the public purse. So there is the danger of coercion. The present legislation protects those who are vulnerable so that no harm is done to them.</p> <p>Rather than offering assisted dying the state should make greater investment in the Hospice movement and palliative care, by employing more doctors and nurses who are specialists in administering palliative care and drugs, so that the terminally ill and dying can enjoy a qualitative life free from pain in their final months, dying in dignity with their loved ones around them. Unfortunately, the Canadian experience now includes the budget for Assisted Dying/Assisted Suicide/ Euthanasia in the budget for palliative care. To my mind there is nothing progressive about promoting legislation to allow people to end their lives. Life is precious and each individual is of infinite value and worth no matter who they are or their circumstances. It is the responsibility and mark of a civilised society to care for the vulnerable and weaker members of their society.</p>

Disagree	<p>Having worked with many terminally ill people over my career I believe that making sure providing appropriate pain and symptom relief with the intention of relieving a person’s pain and suffering is legal, sufficient and is good clinical practice.</p> <p>I find the description of the laws in other counties is deceptive, for instance, voluntary assisted dying is not legal in the whole of Australia and has only been introduced (or is yet to be introduced) in the most Australian states and then in very specific circumstances.</p>	Other	<p>This question, and questions 12 and 13 is biased and assumes I agree with assisted dying, which I do not!</p> <p>I do not agree with the bill. I am extremely disappointed with the process for this and the lack of public engagement. All of the questions within this consultation are very biased and are written in way that makes the reader feel that the decision to introduce this bill has already been made and that this consultation is an afterthought. Therefore I have not answered many questions! There has been no prior engagement with stakeholders and the public prior to this and I view this as a reflection of the arrogance of the current political administration.</p>
Agree	<p>An individual should be permitted agency of their own life. In the same way that people can choose to have, or not have, particular surgeries or procedures. No one should be permitted to determine for mentally competent individuals whether they can die or not. "My body; my choice" seems like an appropriate quote here and I know has been used in the abortion debate. The same principal should apply here (and not just for terminally ill people - but that's a debate for another time).</p>	Not Answered	<p>An additional observation I'd make is that a Dr's (and GP's) role is to keep people alive and prevent suffering - so this may go against their moral/ethical medical code. To that end I'd use dedicated "euthanasists" (medical professionals trained and specialising in this process) rather than putting the onus on a GP. They'd still undertake all the necessary mental and physical checks on individuals - but there wouldn't then be the risk of them "opting out" as this would be their sole responsibility.</p> <p>Also; I'd expand this to include anyone over the age of 18 and mentally competent that wants it (not only terminally ill people or those in severe and undue pain). Same processes would be followed for anyone requesting it of course but it would be better for someone intending to take their own life to be able to do it in a controlled and regulated way - rather than, say, throwing themselves off a high building or ingesting over-the-counter chemicals.</p>
Agree	<p>An Adult has the right to make Their own decision</p>	For over 5 years	

Agree	<p>Opponents to euthanasia tend to be younger and / or base their objections on religious grounds and look at euthanasia through the wrong end of a telescope thus making death an abstract conception. When a person reaches their eighties or more their perception is different. Death becomes very real , you can feel death close to you, you may want to reach out to it if your suffering is intolerable.</p> <p>Contrary to the zealots claims euthanasia seems to be practised in various forms around the world including in western medical circles.</p> <p>In a democracy the views of the majority must prevail. If an individual does not agree with euthanasia then that is their choice but their wishes can not be imposed on others.</p> <p>Words of caution :-</p> <p>Who and where will Palliative / end of life care be administrated ? At present under NHS we have often a three week wait to see a GP doctor; three years wait to see a Consultant and possibly a further three years wait for surgery. All levels of medical staff are desperately short staffed so where will the highly skilled people come from to administer Palliative care ? Is it intended that NHS assume total responsibility for Hospice / Palliative Care ? Most people strongly desire to die at home in their own bed and surroundings. Will this be available considering the shortage of staff mentioned above. Or is this a further step to Privatisation ?</p>	For over 5 years	
Disagree	<p>Life is precious, modern medical Science has advanced enough that we assisted suicide should never be an option. As mentioned on the Isle of Man government web pages "Suicide is not inevitable, and is never the only option."</p>	Not Answered	
Disagree	<p>I cannot see any way in which permitting assisted dying would not become disastrous on the Isle of Man, and this is clear from the very real "slippery slope" that can be observed in countries where it is legal. In the Netherlands, euthanasia may now be performed on children as young as 5. In Belgium, there are numerous cases where significant pressure has been exerted doctors on terminally ill patients to end their lives even if they do not wish to. In Canada, it will shortly be legal to use assisted suicide on mentally unwell patients. As someone who formerly struggled with severe depression and considered taking my own life, and who is beyond glad not to have done so, now with a thriving career and family, this could not sound more egregious. These are not rare exceptions that can be legislated against - these are the inevitable outcomes of any assisted dying regime.</p> <p>Additionally, there is excellent palliative care available in our health and social care systems, making it nearly impossible to justify permitting assisted dying even for those who are terminally ill with a short prognosis. It would be untenable to put such systems in jeopardy in favour of an "easy way out" through assisted dying.</p>	For over 5 years	<p>The use of the term "assisted dying" is euphemistic, in view of the fact that the procedure directly kills the patient rather than accelerating (or, indeed, not prolonging) their death; examples of the latter include the use of opiates for pain relief or ceasing to feed someone who can no longer absorb nutrition, for example. From a medical ethics perspective, that feels extremely different from given someone a pill or intravenous drug that will effectively poison them to death.</p> <p>Furthermore, some of the provisions in this consultation point to potentially dangerous side effects of any proposed legislation. For example, all patients should have mandatory psychiatric care and assessment before making decisions, and it would be unthinkable not to include this. The idea that end-of-life pills could be kept at home rather than immediately returned to a pharmacist is one with possibly chilling consequences. Q10 also touches on the idea that those who are not even terminally ill could die under this regime, which is the beginning of a slippery slope. For many of us with chronic illnesses/pain and mental health problems, it makes us feel like our lives are not valued (regardless of whether that is the case).</p>

Disagree	<p>My father initially suffered severe pain from an aggressive terminal Mesothelioma cancer, but due to the excellent palliative care that he was given by hospice he was able to have a peaceful death. Palliative care is much better than it used to be and there is no need for assisted dying. The last 5 months of his life, whilst extremely difficult, turned out to be the most emotionally and spiritually bonding experience both for him and for our family. Other patients who may face similar extremely difficult challenges should not be robbed of the opportunity to experience what my father experienced in his last 5 months, which can only happen if death is natural and comes when God intends it to come. God is the giver of life and should be the only one to determine when that ends. His ways are far above ours and it is arrogant of us to think that we know better. Who are we to say that we should be entitled to take life when we cannot even create it? Even for a person who is an atheist, whilst assisted dying may superficially appear humane and kind, it will typically appeal to those who have not thought carefully of the complications of introducing such a bill, and how this can lead to a downward slippery path whereby any condition that a person does not want to have to endure can simply be dealt with by taking their own life. Most people in these situations when given the right care, love, support and information will not chose such a route. Those less cared for, or less informed (including spiritual) are more inclined to seek what may seem as the easy way out, but which often proves much more complicated than what they were first led to believe. If as a society, we introduce such a bill, we are effectively abdicating from our responsibility to look after these people properly. This I believe is a poor reflection of our society and we must do everything to resist the temptation of allowing for assisted suicide.</p>	Not Answered	<p>This Questionnaire is not about whether the public should support the assisted dying bill or not! It has been formulated on the basis that assisted dying will become legal and the questionnaire is merely to establish how best to go about it. This type of questionnaire is only relevant if it is agreed by majority public opinion that assisted dying in some way shape or form should even be legal. The bulk of the questionnaire is completely irrelevant if assisted dying is not supported in the first place. Clearly the authors of this questionnaire are trying to push their own agenda or they are completely inept at being able to formulate an unbiased poll. Biased questionnaires like this are not helpful and should be completely scrapped and re-done.</p> <p>This questionnaire should include relevant questions about why assisted dying should or should not be supported and only if an individual supports assisted dying should these "follow on" questions be asked. If the questionnaire is to maintain any form of validity it should be split after the initial question of do you support the notion of assisted dying (question 8) with relevant questions being asked based upon this initial response. I therefore strongly recommend that the government redo this questionnaire if they want to see a true reflection of what the Isle of Man community thinks on this subject. This current questionnaire fails basic market research criteria which is alarming given the seriousness of such an issue.</p>
Disagree	<p>I am deeply troubled by this bill. I do not believe it is in the best interests of this island's residents, medical staff, or wider community. I am appalled that our government does not seem to value human life nor appear willing to listen to the medical community who do not want to participate in killing people.</p>	Not Answered	
Disagree	<p>I am a practising Christian and believe life is sacred so no way can I support assisted dying We have a wonderful hospice who make sure each person in their care has a dignified and peaceful death</p>	Not Answered	

Agree	<p>My experience with the end of life suffering of several family members and close friends has made me very averse to living to any old age. My mother-in-law, a devout catholic, spent the last 3 years of her life bed ridden and suffered a series of mini strokes. At the very end, she prayed hard for god to end her suffering. My own mother, still alive at 94, has been bed ridden for 2 years but gaga from dementia for 7 years. She does not recognise any of her children or grandchildren. Instead for being happy that my mother is alive, myself and most of the family are sad to see her in her current state of affairs. While we cannot make the decision for her, family members are confident that she would not have wanted to end up the way she is.</p> <p>I myself, am a 7 years mouth cancer survivor. While I am grateful to be alive, despite facial disfigurement, i definitely want the option to end it all if I am diagnosed with being terminally ill with only pain and suffering to look forward to at the end of life. My decision would also alleviate the suffering of all my family members especially my beloved wife.</p>	Not Answered		
Disagree		Not Answered		this bill should not take place
Disagree	<p>Life is a precious thing and should be preserved. The end of life is in God’s hand only. I have recently lost my husband and every moment was precious to us. It is after all murder or suicide.</p> <p>This report looks more like it has been decided rather than a consultation.</p>	Not Answered	I don’t agree to anytime limit. It just shouldn’t be allowed	I haven’t answered a lot of the questions as they are not relevant to my views. This whole document is written as if the bill has been passed.
Disagree	<p>1) The Island already has a reputation for higher than average suicides. Do we wish to be known as the Isle of Death</p> <p>2) Doctors sign a declaration to preserve life</p> <p>3) We have an excellent Hospice for palliative care on our Island</p> <p>4) Is this not a form of Assisted Suicide?</p> <p>5) What is Dr Allison motive for Assisted Dying ??</p> <p>6) Samaritans police is to save lives</p>	Not Answered	not answering eligibility questions otherwise it suggests I am in agreement to assistant dying	Not applicable as I do not agree with assisted dying
Disagree	<p>We live in an era when healthcare is not ethically based solely on need of the individual and as such is open to pressures that are often not essentially in peoples best interest.</p> <p>Vulnerable people can be easily persuaded by others motives and olderand ill people can be moved to decisions that are based on priorities that are flawed and biased and not founded on the sacnctity of life no matter how near the end. Offering suicide to people who may well recover is also a distinct issue for those with mental health disorders. No one has the right to suggest death in the face of adversity that is treatable.</p> <p>This suggestion versus long term care will always be seen to be economically preferable in the face of rising costs in healthcare.</p>	For over 5 years		Why is this Islands Parliament working on legislation to provide an end of life to babies and ill people when it cannot provide healthcare to many who are living with disability or long term conditions fully?

Disagree	<p>Assisted Dying is assisted suicide which is totally against my beliefs and poses a great danger to our most vulnerable people on the Isle o f Man.</p> <p>We have an excellent Hospice and Rebecca House in the Isle of Man which make it possible for effective pain relief for terminal care.</p> <p>We trust our Doctors to administer drugs which help prolong life and not end it which I am sure is their policy.</p> <p>All lives are valuable and it is not our choice to end our own life but to bear our pain with dignity and not encourage others to assist in the act of assisted suicide.</p>	Not Answered	
Agree	<p>Adults who can make their own decisions should be allowed to comfortably die as their own wish, within their own home legally, and it should be respected</p>	Not Answered	<p>This bill is for the best of the island, it would allow people who wish to die in piece in the comfort of their own home and do it legally without consequence, anyone who wishes to die anyway would probably find a way to make it happen regardless, whether through suicide or by holiday to Switzerland</p> <p>Use common sense and push this bill through</p>
Agree	<p>If I was terminally ill, I would want the opportunity to die with dignity on my own terms.</p>	Not Answered	
Disagree	<p>Unnecessary, people who are terminally ill may request that life support is withdrawn and pass away naturally.</p> <p>Examples of places where assisted dying is used are NOT similar to the Isle of Man. Our Health Service money should NOT be used to take life. No impact study has been carried out to suggest the results of large numbers of very sick people moving to the island in order to use our Health Service to die. How many might come? What increase in numbers of doctors, pharmacists and psychologists has been factored into the Manx Care budget? We are already stretched beyond the limit. Ultimately it cause the collapse of our National Health Service.</p> <p>Dangerous. If Assisted Suicide Laws are passed in most countries it will result in a reduction in medical research into medical conditions that are at present incurable.</p> <p>Furthermore, it seems inevitable that Assisted Dying law will just begin with the terminally ill. The individual free choice argument in Canada has extended the right to Assisted Dying to teenagers, disabled etc. Many campaigners will admit that the terminally ill are just the start.</p> <p>The 'IOM Gov. Consultation' lacks credibility as a genuine consultation as all questions after 8 are loaded with assumptions to give the desired response to the question however answered.</p>	Not Answered	

Disagree	<p>I am opposed to assisted dying being permitted on the Isle of Man for the following reasons:</p> <p>All lives are valuable and are worth living, even those with illness and disability - assisted dying erodes this concept.</p> <p>Patients who have just received a terminal diagnosis are particularly vulnerable and be depressed and may be susceptible to the suggestion of assisted dying as an option as it may reduce the burden on their family.</p> <p>Suffering is subjective and pain can be both physical and psychological and can vary from day to day. Palliative care is holistic and can be provided by hospice on the Isle of Man. More money should be invested here rather than in assisted dying.</p> <p>The introduction of assisted dying normalises suicide. Society and medicine aim to prevent suicide and treat the underlying condition, not promote assisted suicide.</p> <p>It is difficult to accurately predict how long a person has left to live and the course of their terminal disease.</p> <p>If tablets are given to the patient it is not a reliable way of producing a painless and peaceful death. There may be the need for a healthcare professional to step in and administer intravenous drugs which could be traumatic for the patient, relatives and the healthcare professional.</p> <p>Would we see sick people wanting to come to the Isle of Man with the aim of having assisted dying? This would result in a further burden on our already stretched healthcare services.</p> <p>This could be embarking on a 'slippery slope' where the boundaries of the original laws have been stretched over a period of time e.g. Belgium, Canada, Holland where numbers of assisted dying patients has increased over the years.</p>	Not Answered		
Disagree	<p>A. I feel some people would feel they must do this so as not to be a burden on their family</p> <p>B. Financially some may feel/ are persuaded, that they spend their children's inheritance on their own comfort.</p> <p>C. Medicine can keep sick people comfortable.</p>	Not Answered		<p>Doctors take the Hippocratic oath.</p> <p>It is so wrong to expect them to be involved in assisting suicide.</p> <p>Doctors always act in the patients best interest without laymen trying to force them to take another persons life.</p>
Agree	Everyone should have the right to decide whether they have the quality of life they need not to feel in distress.	Not Answered		
Disagree	It risks pressuring the elderly and those with significant illness to consent to or request euthanasia in order to remove stress from relatives and friends. Also, we have excellent palliative care on the Island.	Not Answered	There should not be assisted suicide in any circumstances.	Most of these questions are irrelevant if you do not support assisted suicide. I have therefore not answered these.
Agree		Other		
Agree	Agree, but it should be available for people who are not terminally ill, eg double amputee.	Other	You don't need to be a resident of Switzerland to have an assisted death.	The option of an assisted death should be given to everyone. Not all chronically ill or disabled people are terminally ill. No one has the right to dictate the conditions that someone must live under.
Agree	The right to die is fundamental and a humane society should enable people to seek medical assistance to die if that is their wish. The British Isles have for long agreed that animals should be spared suffering and it must surely be right that human beings be shown the same compassion.	Not Answered		

Agree	terminally ill patients who have No Hope of a reasonable quality of life should be given the option but only after All other options have been fully discussed with all those involved	For over 5 years		18 is way too young to make such decisions not enough room for conscientious objections no room for miracles that can and do happen suicide is self murder, assisted dying is helping someone to die = accessory to murder! living wills are important in the event of a person being in a long term coma with no hope of recovery..... although miracles can and do occur in this area!
Agree	Assisted dying should be available to e everyone, not just terminally ill people. Disabled people, or chronically ill people may not be terminally ill. No one has the right to prevent them from having an assisted suicide. People will still commit suicide whether the bill is passed. Passing the bill will make it safer for everyone.	Other	Switzerland allows people who are not residents to have an assisted death	This questionnaire seems to be very pro assisted dying The option of an assisted death should be given to everyone. Not all chronically ill or disabled people are terminally ill. A person's suffering is unique to them, regardless of if they are terminally ill, and people should have the right to have an assisted death.
Agree	It already is, in reality. Morphine given to cancer patients, for example.	Not Answered		If IOM goes down the assisted dying route, it must be in a completely controlled environment. Not people collecting drugs from pharmacies. These drugs are dangerous and it cannot be allowed that they might get into the wrong hands. Just the thought of the drugs being in pharmacies is ridiculous. Administration of the drugs must be in a completely controlled environment.
Disagree	My concern is that legislation will not be up to the job of protecting the vulnerable.	Not Answered		There appears to be no provision within this consultation to explore the wider implications of an assisted dying Bill on the Isle of Man - and this concerns me. I am against the Bill for many reasons but my primary concern is that there is no consideration to the inevitable damage that this will bring to the good reputation that the Isle of Man currently enjoys.
Agree	I want to have the option to end my own life and not to be kept alive against my will when in particular circumstances for example (but not limited to) extreme pain / suffering.	For over 5 years		Not only for exteme pain and suffering but also for advanced dementia and other mental disorders but only if the patient has signed a legal document agreeing to assisted dying when they are still fully mentally aware i.e. before the onset of advanced dementia and agian this should be verified by two independent doctors / psychiatrists. There may be other instances apart from pain and dementia where assisted dying should be allowed but again with the necessary safeguards in place as mentioned above to avoid abuse of the process by people other than the patient.
Agree	If someone is suffering and has no hope of recovering why should they be in agony for longer than is required.	For over 1 year		
Disagree		Not Answered		

Agree	3 years ago I helped to nurse my mother through her terminal illness. The pain relief medication which she was prescribed as part of her end of life plan did NOT relieve her pain adequately. As a result she died in agony and in fact she had begged me to "let her go" repeatedly. She needed to be moved in her bed in order to be cleaned and also to have pain relief patches applied which caused great distress to her (and also to me which really is not important here but I wish to raise the point. I have never wished my mother any harm but wished with all my being that her suffering could have been ended and if that were possible I would have regretfully performed that service for her).	Other	I would not wish to see "tourist suicide" to be available however if the person involved wished to be with family on IOM at the time of their passing this should not preclude their treatment on the IOM	I find completing this survey distressing - this is not a complaint merely a statement of fact. The questions asked in the survey are all pertinent and give me comfort that this issue has been given will continue to be given fully informed consideration. Permitting somebody at end of life to die in agony I find to be absolutely inhumane. Regarding Q19 - there will be cases where it is not possible for the patient to sign a declaration however if they can still speak then a secure and witnessed recording should be take or even a video recording to allow the patient to signify their wishes.
Agree		Not Answered		The right to choose is long overdue.
Agree	Permitted. We are able to put down aniMals to stop them suffering but allow humans to waste away. Need to consider alzheimers/ Parkinsons/dementia also They aren't classed as terminally ill but these are wasting diseases and ruining quality of life	Not Answered		
Agree	I believe people of sound mind should be given the choice, if they wish to end their own suffering.	Not Answered		
Agree	I witnessed my own father dying with terminal illness	For over 5 years		
Disagree	I believe that to assist a person to commit suicide should remain illegal in the Isle of Man. The proposal states that there will be safeguards in place to protect vulnerable people but I know to my cost that when a person has need of safeguards they simply do not exist here in the island. Patients and professionals can be coerced into agreeing to things they know to be wrong. To accept assisted suicide diminishes the status of every human being in the island. It's the thin end of a very dangerous wedge.	Not Answered		
Disagree	The island is a place of safety at the moment. When the law is changed to allow this, there will always be loopholes that will be pushed to allow more and more. Doctors make the promise to promote life, not take it. Doctors and medical staff should be able to be totally trusted when people are in vulnerable positions. The hospice does amazing care and euthanasia is not needed. Sometimes people get better when not expected. They may lose the opportunity for this to happen if the law is changed.	Not Answered		Q22 and 23 ask about allowing lethal medication to be in the community. This shows how dangerous the whole thing is. This type of medication should never be allowed out of medical practice and should not be allowed at all.

Disagree	<p>I do not believe that the island should introduce legislation to support assisted dying.</p> <p>I do not believe that Doctors and other medical professionals (e.g. Pharmacists) should be asked to prescribe lethal drugs to shorten life, under any circumstances.</p> <p>Our society already recognises that suicide is wrong and illegal and this must be maintained.</p> <p>From my own experience, prior to the death of my father from Bowel Cancer, we are able to provide excellent palliative care in order to remove the suffering and allow terminally ill people to die a "natural" death.</p> <p>While I appreciate that a number of safeguards are proposed, there are many examples (e.g. abortion) of these being watered down or removed by subsequent changes to the legislation, so they cannot be relied upon in the longer term.</p>	Not Answered	<p>I believe that this consultation is seriously biased in favour of the Assisted Dying and therefore flawed, by the assumptions made within the questions asked and the multiple choice answers available. I would like this consultation to be disregarded and rerun with more balanced questions and answer options. Due to the biased nature, I have not answered a number of the questions, as they appear to pre-suppose or infer support for Assisted Dying.</p> <p>I do not believe that the island should introduce legislation to support assisted dying.</p> <p>I do not believe that Doctors and other medical professionals (e.g. Pharmacists) should be asked to prescribe lethal drugs to shorten life, under any circumstances.</p> <p>Our society already recognises that suicide is wrong and illegal and this must be maintained. We have to protect the vulnerable in society and the introduction of this legislation will put pressure on some to chose Assisted Dying, in order to stop being a burden. Life is precious and manx society have to protect those vulnerable people at all cost.</p> <p>From my own experience, prior to the death of my father from Bowel Cancer, we are able to provide excellent palliative care in order to remove the suffering and allow terminally ill people to die a "natural" death. We should be financially supporting the hospice movement and world leading palliative care should be provided by the state, with</p> <p>You need common sense and empathy, not relying on protocols all the time !</p>
Agree	<p>Personal and professional experience seeing people suffer severe pain and fear in their final hours.</p> <p>My husband took hours to die, he finally did at four in the morning after bleeding to death, it took me years to get over the horror of that night. I did get medical support but they told my husband they could not hasten his death because of Shipman !</p>	Not Answered	
Agree	<p>I agree with assisted dying. I want to have control over when I die or have close family member(s) able to help me carry out my wishes.</p>	Not Answered	
Agree		Not Answered	

Disagree	<p>I strongly disagree with assisted dying on the IOM.</p> <p>Assisted dying is supposed to alleviate suffering. However suffering is subjective and certainly not inevitable. Through high quality palliative care, physical and psychological needs can be met, as they are on the Isle of Man. I note that Alex Allinson did not consult any palliative care specialists on the Island. In other countries such as Belgium or the Netherlands where assisted dying is established the palliative care is objectively very poor.</p> <p>"terminally ill" presumes that life expectancy can be predicted with accuracy. As a doctor I have seen first hand that illness is very hard to put on a timeline. Is is very difficult to put an exact date when someone is in their "terminal phase" and we can be wrong. Headlines are often filled with stories of "doctors told me I had x months to live but I beat the odds". Predicting how long someone has left to live is fraught with difficulties.</p> <p>I have concerns that any 'safeguards' put in place would fall through, as they have in other areas where assisted dying has been put in place such as Canada. I have serious concerns that this will further impact the people of the Isle of Man and exploit them when they are at their most vulnerable. As doctors, this goes against everything we are trained to do.</p> <p>As a doctor and a person I think assisted dying would be a dreadful thing for the Isle of Man. I have spoken to other doctors working at Nobles, all of whom have serious concerns about this bill. Myself and many other junior doctors were keen to stay on the Isle of Man or come back here later in life- If this was brought in on the Isle of Man it would massively dissuade doctors from working here. The Isle of Man is already struggling to</p>	For over 5 years	<p>In addition to the aforementioned:</p> <p>-All healthcare practitioners should be able to conscientiously object</p> <p>-There should be no financial incentive for healthcare workers providing assisted dying</p>
Agree	<p>I've watched immediate family members, die in agony from terminal illnesses from which there was no chance of recovery, suffering to the bitter end as we would never let an animal suffer.</p>	Not Answered	
Agree	<p>It's inhumane.</p> <p>Having watched the suffering of loved ones, I know I don't want that for myself.</p>	Not Answered	
Disagree	<p>I was my late mother's carer, supported by Hospice who were wonderful. I believe palliative care is the way forward, an holistic approach that helps everyone in the grieving process.</p>	Not Answered	
Agree	<p>Due to witnessing the suffering my father endured from c.o.p.d. How hearing a man who'd always got the most out of life say if he had the capacity to die, he would.</p>	For over 5 years	
Disagree	<p>Exodus 20:13 Thou shalt not kill.</p> <p>King James Bible Authorised.</p>	Not Answered	
Disagree	<p>I disagree with assisted dying as it goes against everything that I stand for.</p>	Not Answered	
Disagree	<p>Assisted dying is actually manslaughter.</p> <p>How do we have the right to decide who lives and who dies?</p>	Not Answered	
Agree		For over 1 year	<p>Strongly support. I have cared for too many people where palliative care does not adequately relieve symptoms. Having seen that, it is a fear of mine far worse than death to die in agony, slowly with cancer.</p>

	Agree	My grandmother is approaching 100 years old in April. It should be a celebration but really, she has no quality of life at all and has wanted to die for at least ten years. She had to go into a care home about ten years ago as her care was too much for my parents and family to provide . Her care home has looked after her adequately but she is now suffering; she is severely underweight, bed ridden and just wants to sleep most of the time. She cannot enjoy food anymore as she cannot have solids. Overall, if she was a cat or dog, a vet would have been called to put her to sleep, as she wants.	Not Answered		I think that each case is individual and some are far more complex than others. Care professionals may also struggle to adhere to the Assisted Dying process if their personal opinions and beliefs do not reflect the individual's preferences, again each case would need to be treated individually. But overall I certainly support Assisted Dying if the individual is suffering like my grandmother is daily and also like my father in law was for eight years before he died. We need to respect their right to choose when there is no quality, purpose or enjoyment in their lives. I have tried to improve my grandmother's and my family have but she has dementia and does not know who we are and appears confused and upset most of the time, it's awful to watch but far worse for her.
	Agree		For over 1 year		
	Agree	Patients should be allowed to call time before losing their dignity or suffering unduly. This also saves the family the pain of watching a loved one suffer.	Not Answered		My client used assisted dying in the Netherlands and his family told me how lovely his death was - totally within his control and exactly as he wanted it and when he wanted it. There was no waiting - he died the day after deciding. His absolute aim was to be in control of his death and not lose his dignity or mental capacity. Assisted dying enabled him to avoid a very painful and debilitating death.
	Disagree	I think “terminally ill” has blurred lines. As a mother of a life limited child I fear that if this bill is passed there may come a time where I am coerced into a course of treatment that is not in her best interest. Manipulated into believing “it’s the right thing”.	Not Answered		Why do we bother with mental health care at all, when seemingly as proposed here 2-4 weeks of depression and suicidal thoughts are enough to justify ending a persons life. As there is no further place to write I will place other comments here. You cannot know if someone is being coerced, how many people suffer at the “hands” of abusive partners through all forms of abuse for extended periods of time without confiding in anyone until there is something catastrophic, even when agencies are involved the reports all say “we didn’t know, there were no obvious signs” It concerns me that this bill is being introduced at a time of great NHS struggle and then the Hospice on island has less than 12 months operating funds in the bank. First the abortion bill and now this, does Dr Allinson really have no regard for the value of human life. Are we really all just disposable commodities draining the system. It saddens me deeply that in a time such as this the govt are choosing to step out and be different from other jurisdictions in such a manner as this. If we want to look to other countries for inspiration surely it should be in areas of education and enterprise attract people here to flourish. Not to die! What a shame for our nation that this is a focus and financial burden when we have teachers striking, a crippled CAMHS service, an outstanding palliative care provision about to close with no funding.

Agree	To minimise suffering and maximise dignity to the individual. We don't allow pets to suffer and it's cruel to allow humans to suffer painful and distressing deaths. People should be able to have say or control over how their life could end.	Not Answered		If people can't write, how could they write a request for assisted dying? Reports should justify the resources required. I suppose it would be very useful to have a record of how assisted dying is being used so we can see if the system is being abused and who's using it and why. With so many jurisdictions considering this option, Dara is clearly helping some to learn from others and it will help reassure the public. I hope assisted dying will be possible if and when I might need to take advantage of it.
Agree	It is inhumane not to offer assistance to those who have reached an informed determination that their continued pain and suffering outweighs the benefits of living longer	Not Answered		
Agree	People should be allowed to die with dignity and end their suffering if they wish.	Not Answered		
Disagree	I feel this is open to confusion and abuse. There are many vulnerable people in society who may not understand the outcome and implications of assisted dying. I believe that some people may feel pressured by the desire or feeling that their family may be 'better off' without them alive and ease any responsibility on them. How do we honestly know how long a person has to live, even if diagnosed with a terminal illness. They may be given months by a medical professional, yet go on to live for years or in fact be cured. Would people who wish to die with assistance be fully 100% aware of how the end of their life treatment is given, will they be shown a documentary to see exactly how they will die and feedback from families who have witnessed this. My personal belief is that I do not agree with the passing of the Assisted Dying Bill.	Not Answered	To answer any of the above questions is misleading as I do not agree with assisted dying - these questions should have been worded differently as the results of answering these do not reflect an accurate response	To answer any of the above questions is misleading as I do not agree with assisted dying - these questions should have been worded differently as the results of answering these do not reflect an accurate response
Disagree	Improvements in palliative care means people can experience a natural death rather than taking their own life. It is a decision that doesn't just impact upon the patient but others close to them. It could tear families apart. As a Christian I believe that taking one's own life is not our decision to make. One practical question : if you choose to die is your life insurance policy still valid ?	Not Answered		I disagree with assisted dying so I cannot answer most of the questions.
Disagree	Disagree with this bill, life is so precious and I know so many people who have had terminal illnesses who have then made a miraculous recovery and are still living full and healthy lives.	Not Answered		I find the process of this questionnaire very biased towards agreeing with the bill so I am finding it hard to answer every question truthfully.

Disagree	<p>There can never be sufficient safeguards to ensure that someone really does wish to end their life. Depression, a frequent and understandable result of a terminal illness, by its nature changes the view and opinions of those whom it affects.</p> <p>In every jurisdiction where this has been permitted, safeguards have gradually been eroded. Far too much pressure is brought to bear on people to feel that they are a burden both on their families and society. The focus should be on helping them to enjoy the remainder of their natural life.</p> <p>If the body is not ready to die, it will react against drugs which are introduced to effect that, often causing the person so killed to experience pain and discomfort in their last agony. The evidence shows that it is not a painless "pleasant" experience.</p>	Not Answered		<p>For most of these questions, I have given no answer because I strongly oppose the Bill. It is regrettable that there is no "not applicable" option for those of us who oppose. As I mentioned previously, there can never be sufficient safeguards and it is deeply troubling that the proposal would require doctors to make a statement that a person should die.</p>
Agree	<p>The adult affected should have the right to choose and decide when they no longer have quality of life.</p>	For over 1 year		<p>I think a fit person should be able to have a living will stating that if they become severelyincapacitated or unable to look after themselves they want the facility for assisted dying.</p>
Agree	<p>I agree in principal. However there is evidence that once a country introduces assisted dying legislation that its perimeters expand to encompass other conditions. For instance Canada allows people with mental illnesses to be assisted to die. I believe Belgium may also have the same law.</p>	Not Answered		<p>I have concerns that the availability of assisted dying will not remain just for those people who have a terminal disease. There is already mention of "unbearable suffering" not attached to a terminal disease.</p> <p>How is that going to be quantified? Many people who have depression undergo periods of suffering which they find unbearable at the time but eventually with the help of medication they can make a recovery. The problem is often that they do not take the medication or stay on the medication. Many elderly people do not want to be a burden. What safeguards will be in place to prevent them requesting assisted dying either because they believe they are a burden or are persuaded by those around them (not everyone is lucky to have a loving family) that they are a burden.</p>
Agree	<p>Terminally ill people, who are competent to make reasoned decisions, should have control over their own destiny</p>	Other	Registered as a permanent resident with GP/Manx Care	
Agree	<p>I think it is a humane need for it to be available. I don't think people should have to suffer clear and obvious serious pain waiting to die or suffer incurable and incapacitating physical or mental degenerative conditions if they choose not to and provided there are safeguards and appropriate professionals involved. As it is, people suffer, and some kill themselves without anyone to support them through their final moments.</p>	Not Answered		<p>This survey seems to assume that people being assisted would take medication home to take, personally I think it should be done in a Hospice type setting.</p>
Agree	<p>I saw my mother die of stomach cancer she pleaded to be let to die. She couldn't drink or swallow and even with morphine drip was in pain. Every time she closed her eyes we just hoped she didn't wake up which was horrible.</p>	For over 1 year		

Disagree	<p>I disagree because I believe that every life is precious and a gift, that our earthly lives are in God's hands (from conception to death) and that nobody should be aided in taking their own life, no matter what the circumstances. Also, many healthcare professionals say that it is very difficult to predict how long a 'terminally ill' person has left to live, and some friends of mine have lived much longer with a diagnosis of terminal illness than they were expected to. They were able to spend unexpected precious time with family and friends. I actually personally know 2 people on the IOM who, by the grace of God, have had a miraculous recovery from a diagnosed 'terminal illness' and have been living life in all its fullness since then (one of them for over 20 years!). I also disagree because of the danger of abuse, as I fear that despite the best intended safeguards, there will be vulnerable people coerced into this against their will or personal belief. I also fear that once legislation has been introduced, we are on a slippery slope, as has been seen in several countries where assisted dying has been legalised; in Canada, the law has continued to be stretched from 'terminally ill adults' to include 'chronically ill adults', the disabled and the mentally ill, some of whom would have had many more years to live with appropriate health care. I believe that introducing the proposed legislation would cause more harm than good.</p>	Not Answered	<p>I don't agree with the questions in this consultation, as several questions seem to suggest that people are in favour of such legislation being introduced in the first place. It seems wrong to me to ask in Qu. 8 whether people agree or disagree with introducing 'assisted dying' for terminally ill adults but then to ask many other questions which could lead to allow the Bill to include offering 'assisted dying' to minors, to people without terminal illness and to widen the Bill to include offering 'assisted suicide' and 'euthanasia.'</p> <p>I disagree with any change in legislation which would allow for either 'assisted dying', 'assisted suicide' or 'euthanasia' for reasons I have mentioned in my answer to Question 8. I want the IOM to focus on making sure anybody suffering pain has access to appropriate health care, including the best possible palliative care, to enhance the quality of their life; improved support for people suffering with mental health issues is vital, as is improved support for people with disabilities. With the danger of the original proposal becoming stretched and changed over time, we don't want to end up with people choosing to end their lives early because of financial and economic pressures or other struggles, when there could be help and support offered instead. We need to guard against suicide becoming an acceptable or even desirable option to end your troubles; we need to do everything we can to help people lead the best lives they possibly can (not to offer them the best death possible instead).</p>
Disagree	<p>It is too risky to involve government in a process that is so personal to both the ill person and their family and friends.</p> <p>There could be unintended consequences that would be too difficult to unravel.</p> <p>There are ways to assist a person with palliative care in the final stages of their lives without looking to introduce an administrative process at that time.</p> <p>This could amount to state sanctioned murder of people in certain circumstances.</p> <p>Some of the following questions are consequently irrelevant to me.</p>	Not Answered	<p>Most of the preceding questions are predicated upon me agreeing to the principle of assisted dying, which I do not.</p>
Agree	<p>No one should have to die in pain</p>	For over 5 years	<p>While I agree in principle, I am very concerned that stringent safeguards should be put in place so no one is inappropriately encouraged to end their life. It should only be available if someone is in uncontrollable pain or their quality of life has become intolerable. Where possible a person should be encouraged to continue their life with full support and effective palliative care</p>

Disagree	I believe that legalizing assisted dying would not only make the Isle of Man a center for death tourism, but would also create a dangerous blurring of boundaries as to when this option should be accessed. If we are allowing for this to be an option for those with physically life-limiting illnesses, where do we draw the line for those with mental health problems, for example. It has also been seen in countries that have gone ahead with such legislation, that there is known to be an element of economic pressure to individuals' decisions in many instances, which I believe to be morally wrong, but somewhat inevitable if we are to push for the same pathway. Ultimately, as much as on face value we should make people's deaths as comfortable as possible, we already have excellent hospice care on island who provide this. In my opinion, this legislation should not be called 'assisted dying', but more aptly, 'assisted suicide'.	Not Answered	<p>I found this survey to be very biased, with little room for individual's to disagree through leading questions. I have explained my answers to such questions below, as there appeared to be no room or option for an opinion that completely disagrees with the legislation being passed in the first place.</p> <p>9: I selected 'not sure' as there was not an option for not agreeing that there should be any form of limit on an individual's life expectancy</p> <p>11: I selected 'no', as there was not an option for not believing that death should be induced by either oral medication and/or intravenous medication</p> <p>12: I don't believe assisted dying should be available at any age</p> <p>13: I don't believe that assisted dying should be an option</p> <p>15: I selected 'no' as I do not believe that the process of assisted dying should happen at all, therefore establishing how many doctors get to decide this does not apply</p> <p>19: Again, I selected 'no' as I do not believe that the process of assisted dying should happen at all, therefore establishing how many doctors get to decide this does not apply</p> <p>20: I selected 'yes' as I believe there should be as much time as possible for people to reconsider this decision. However, again, that does not negate the fact that I do not believe that it should be an option in the first place.</p> <p>21: I selected 'no' as I don't believe that assisted dying should be an option, therefore discussing the number of days before this process would happen does not seem applicable.</p> <p>Most of the questions seem to presuppose that assisted suicide is going to be introduced and it is not clear how someone who is against it in principal is to resspond. For example, should a medical practitioner be allowed to opt out of the process? There is no option for someone who believes no medical practitioner should ever be allowed to participate in the process.</p> <p>I'm appalled that this is even being discussed and wish it would be thrown out immediately.</p>
Disagree	This will involle a lot of terminally ill adults feeling under psychological or even real outside pressure to take this step so as not to be a burden to their family or health care system. It will inevitable spread to other groups as is happening in Canada, for example.	For over 5 years	
Disagree	Not necessary or advisable - allow those in palliative care to do their jobs.	Not Answered	
Disagree	I cannot agree with assisting someone to take their own life, we are playing God at that point and to take the life of another human being, or to assist them in taking their own life, is completely wrong. We are taking the place of God and taking life and death into our own hands. This will put undue pressure on doctors who disagree with this legislation and put them in an impossible situation.	Not Answered	

Disagree	Whether and when abortion is murder is arguable. Actvely ending another person's life, if that life has not been forfeited by ciommitting a capital crime, is, in all cases, simpy murder. And legislation permitting it would lead to murderous pressure on vulnerable people to end their lives prematurely. And end-of-life care these days is better than it has ever been before.	Other	IT SHOULD NOT BE AVAILABLE TO ANYBODY, ANYBODY, ANYBODY, so the correct answer to the abov questions is n/a, unfortunately not one of the options.	IT SHOULD NOT BE PROVIDED!!!
Disagree	The so-called Right to Die could so easily become a duty to die. Emphasis should instead be upon palliative care. We should not allow panic decisions to influence law-making, as hard cases make bad law.	Not Answered		
Disagree	It has been demonstrated by countries such as Belgium, Netherlands, and Canada that any limitations and protections are very quickly eroded by a slippery slope and increasing numbers of vulnerable people are at risk of having their lives terminated. Fundamentally the principle that all life is sacred should not be diluted. Instead increasing resources should be invested in hospice and end of life care	Not Answered		As I fundamentally disagree with the introduction of legislation for assisted dying many of my answer above are not strictly appropriate because the questions assume the legislation will be introduced. I am strongly against assisted dying becoming available at all and my answers to the above questions should be read in that light.
Disagree	Totally against the Hippocratic oath and as God gave life so it is He who takes it away not man	Not Answered		
Disagree	Life is a gift. We have good medical care to support the terminally I'll. It could be abused, rules ignored or there could be coercion	Not Answered		
Disagree	Although it is supposed to be available to people with less than six months to live, any doctor will tell you that they cannot say with any accuracy how long someone has left to live. We hear time and time again of people who outlive, sometimes by years, any diagnosis. But the vulnerable and elderly will feel under pressure to avoid being a burden to their families by this route. We need to protect the vulnerable in our society, not put them under any undue pressure. The doctors will eventually be pressured into carrying out the action, which always seems to happen despite any so called safeguards. I wonder is Dr Allinson be prepared to undertake administering the drugs?	Other	I totally disagree with assisted dying, assister suicide or euthanasia for anyone.	I find this consultation completely loaded towards assisted dying, assisted suicide, euthanasia, as most of the questions assume that I have agreed with bringing in the legislation. The provision to give an answer assumes that I am in agreement and ask for answers to do with its administration.

Agree	I agree in principal to assisted dying to allow the terminally ill patient to die with dignity. I do not believe that keeping someone alive (for the sake of morality) to be the right decision. Particularly if the person concerned is deeply unhappy and suffering.	For over 1 year		have any considerations been given to if the person wishing to die is unable to sign a piece of paper? Will there be other provisions in place? If so then what would these be? I do not believe that a doctor should be present whilst the patient is dying - i believe this would create additional stress for the doctor concerned. In this instance i feel having an immediate family member maybe of more comfort - allowing the family to say goodbye and giving comfort to both parties. This is a very personal experience and if this was me i would only want my family to be present - however i accept that this may not be the same for everyone. My feelings on this topic are based on people who have had a normal life but then suffer life changing injuries which severely affects quality of life or for those people with a terminal condition which again severely impacts on quality of life with death being inevitable (but due to a young age could mean a large number of years alive) - i do not agree that anyone with a psychiatric condition should be considered.
Disagree	With God who created us all in his image can heal those diagnosed terminally ill. I have first hand experience! Also sometimes I've heard the trestment given to terminally ill people can not work and they due a painful death	Other	Don't agree on assisted dying for any years	I am so concerned that when people are older there could be a tendency to pressurise them to agree to assisted dying. Also they could be pressurised or made to feel unworthy unwanted and agree to anyone administering to them something to end their life.
Disagree	Allowing assisted suicide puts vulnerable people in danger of exploitation.	Not Answered		As I believe assisted suicide should not be provided, the only process I can comment on is not allowing it.
Disagree	God alone gives life. People trained to save life and defend life would be expected to do exactly the opposite and take life. Prevention of suffering is essential, but ending a life is not for mankind to decide. It seems in this current society that you are never in more danger than at the beginning of life (abortion) and end of life (euthanasia). We are not like animals where it can be a kindness to end suffering, but made in God's image to live according to the days He gives us.	Other	Assisted dying should be unavailable to all human beings	Many of the above questions are unanswerable to any in opposition to assisted dying. No provision or thought seems to have been given for those who are fundamentally against this bill. The answer is NO TO ANY FORM OF ASSISTED DYING FOR ALL HUMAN BEINGS NO MATTER WHAT THE CIRCUMSTANCES.
Disagree	Invest in palliative care instead. Ultimately we are all terminally ill, in the sense that 10/10 die. where do you draw the line? What doctors think (!) one week, one month, a quarter, half a year, etc...? Is there a list of people who lived significantly longer than what was predicted? If so, send it to all those involved and think twice (see q. 9, which is a very complex question, perhaps on purpose?).	Not Answered		I resent how some of these question are confusingly written and show a lack of due care, which is ironic, given the topic. For instance: Do you agree that two doctors...? If you say no, there is no option to say that one is enough, or that at least three or more are required.
Not Answered	Because our lives are given to us by God I believe we should not take a life in any shape or form.	Not Answered	Do not believe in it where ever you live	No
Disagree	Absolutely not in agreement, doctors are supposed to preserve life not kill people. Life is sacred and should not be hp to us to decide who should live or die.	Other	I am not in agreement with anything here	This is wicked. You are trying to force me to agree with what you are saying

Disagree	I do not believe that assisted dying should be permitted for any person in any country, including the Isle of Man.	Other	I do not believe that 'assisted dying' should be available for any persons, regardless of age or place of residence	I do not believe that there should be an 'assisted dying' bill
Disagree	I have many concerns about legally permitting ‘assisted dying’ however one of the main concerns is the subtle pressure ‘interested parties’ can put upon someone who is in a vulnerable position health wise. These ‘interested parties’ would benefit (financially) from the death of an individual. This subtle pressure would be difficult for a doctor to detect. We must always protect the vulnerable and weak.	Other		
Disagree	Life is precious. We must care for all in our society including the sick and dying. There is no place in our society to give up on anyone, life is too precious. Terminally ill (however defined) adults deserve to receive full care including palliative care. Those struggling to come to terms with their illness must receive proper mental health care. It is not acceptable to offer those who are ill and at their most vulnerable the choice of killing themselves. We can do better as a society. We have a lovely Island with a welcoming reputation, one in which we care for all. Allowing our vulnerable members to kill themselves sends out the wrong message. Anyone struggling with suicidal thoughts (of which I am one) will receive the message that we don't really matter. Life is cheapened by this and in allowing the terminally ill to commit suicide think what that says for people like me struggling with their mental health. The island will be known predominately for assisted suicide. Anyone coming for holiday here will be asked their reasons. The whole idea is abhorrent. Once someone disagrees with this question there should be no option to answer the others which are irrelevant. I hope this is not used to dilute the views those who oppose this legislation in its entirety.	Not Answered		All these questions greatly sadden me. Whoever thought up these proposals is not thinking about the person, the individual, their family and the long term consequences for all involved. We need to care fully for everyone. One of the questions which involved residents or open to others is sickening. Are the legislators actually thinking of turning this into another business opportunity for the Island. Do they seriously want people moving to the Island for the sole purpose of assisted suicide? Words cannot express how deeply offended I am by this proposal and that it is being considered as a good idea by our Members of Tynwald. I most certainly did not vote for anyone to introduce such legislation.

Disagree	Although I am no longer a resident of the Isle of Man, I was born there and I have family on the Island. Life is valuable, and whatever the condition of a person, it remains precious. I get that we want our loved ones to be free from pain and suffering, but allowing a person to take their own life comes with more complications than benefits. Where does it end? I have worked with people who have serious mental health issues and counseled people with suicidal thoughts. Are we going to allow them to just take their life also? You may say no, but if this legislation is in place, what is stopping that from becoming the next step? When a person takes their own life, it is because they do not see their value anymore. They don't think they are wanted, cared for, or loved. Allowing suicide for terminal illness is saying, we don't value you anymore, it is best if you end it now because we don't want to care for you anymore. The argument will be that it is loving to end a person's pain. But its more loving to care for them, to let them see they are valued. Suicide, no matter how you dress it up, strips a person of all their dignity.	Not Answered	
Disagree	We are created by Almighty God and only He can determine when we will die. To interfere with this is morally wrong and against the commandments of God. Those making such policy decisions are even more culpable than those that might carry out acts of euthanasia. There are no safeguards that can be put in place that can satisfactorily protect individuals who are particularly vulnerable and may be coerced or tricked into signing a consent form for euthanasia. To even begin contemplating this is a slippery slope to Government authorised killing. Medical staff are also at risk of being coerced into such killings.	Not Answered	Most of your questions assume that the government is accepting assisted suicide. Such as "do you agree that. only those over 18 should be allowed to consent to Assisted suicide". If I put No that will be interpreted that I agree that we should assist children to commit suicide whereas my stance is that there should be no assisted suicide.
Disagree	1. Euthanasia undermines the value of human life. 2. The proposed euthanasia legislation is no different in principle to that practised in Nazi Germany and Japan. 3. Legalising euthanasia undermines the available palliative care. 4. Once you open the door to euthanasia, even with the proposed limitations, the door will be opened further to include other caveats. This has happened in Belgium and Canada. 5.The proposed right to die will get abused and turned into a duty to die. You naively ignore or underestimate the pressure that will inevitably be brought to bear.	Other	Wrong question. The fact that you are asking this question, together with questions 12 and 13 shows you are biased in favour of assisted suicide. You should be asking the very simple question of whether or not assisted suicide is right or wrong. If it is wrong, then all your other questions are irrelevant.
Disagree	Life is important and when people are vulnerable they need our support not help to die	Not Answered	Fundamentally as a committed Christian I feel life is a gift from God He decided when we are born & will decide the right time for me to die We interfere at our peril

Disagree	From my personal experience having qualified as a doctor in 1983 the majority of patients who expressed a wish to die felt that they were becoming a burden on their careers. This has increased with the development of the nuclear family and the increasing cost of residential and nursing care.	Not Answered		All patients should be assessed by a qualified psychiatrist to ensure that they are fully competent and are not suffering from depression or a psychosis.
Disagree	Life is sacred and suicide is sin. After the initial diagnosis of a terminal illness, a person may well have immediate feelings of despondency, which could lead to suicidal feelings. But given time patients can get used to living with a serious illness or disability, and even regain a quality of life. A study of over 8,000 Irish adults showed that, over time, people who express a wish to die do change their minds, and the likelihood of a change in mind increases as time goes on.	Not Answered		The questions from question 9 to the end of the questionnaire do not relate to my absolute opposition to assisted suicide being a lawful choice as answered in question 8. Therefore I have not answered questions 9 onwards.
Disagree	It is not our right to decide when we die. The Lord Jesus alone has the keys of death and of Hades.	Other	Not at all	
Disagree	Where assisted suicide has been instituted in the US, insurance companies have denied patients with my condition treatment (life-enhancing but not curative), while offering assisted suicide. This is, of course, a financially sensible option (terminating a life is much cheaper than the appropriate medication and ongoing healthcare costs). However, it pressurises patients who could be living a full, interesting, rich life into suicide, as their condition deteriorates rapidly without appropriate treatment. I cannot see that there is a way to prevent this from happening in a cash-strapped NHS, for some conditions, if not for mine specifically. Furthermore, most people who are interested in assisted suicide are what would be, in a non-terminally-ill patient, be termed depression. Appropriate treatment for depression has been shown to decrease the desire for assisted suicide. Instead of encouraging vulnerable people to be suicidal, we should be providing them with appropriate mental healthcare. Extending and ensuring the availability of good palliative care would be a much more appropriate way to invest healthcare funds. I have lived a life in continual pain since I was 12 years old. I can assure you that pain does not mean that life is not worth living. I have a rich, enjoyable, meaningful life, working in healthcare myself and volunteering for organisations that increase the quality of life of children. I have enjoyed spending time with my own family. Pain can be hampering sometimes and sometimes days can be hard, but I am grateful that I am not in a country in which anybody can start asking me if I would like to commit suicide. I can imagine that that pressure would build up and it would become difficult to	Not Answered		Please protect the vulnerable from the pressure to "not be a burden." Please protect the depressed from suicide and provide them with mental healthcare. Please protect those who need palliative care from the inexpensive option of death, and instead legislate in favour of palliative care funding. If you truly care for the vulnerable, the lonely, the depressed, the dying, then provide them with appropriate care, not with death.
Disagree	Because I believe it is every human's right, regardless of nationality, gender or age to have their life protected and repaired to the very best of the skills of other humans regardless of nationality, gender or age. WE ARE ALL EQUAL regardless of nationality, gender, or age. Therefore there is NO TIME to even think of taking a life away from another human living anywhere on this earth but to do everything in our power to preserve each and every person regardless of nationality, gender or age.	Other	For as long as the person lives.	I feel that the questions 15 to 27 were asking for my answers as though I agree with assisted dying which I do not. Therefore the questions should be rethought through to rectify this.

Disagree	<p>I think that assisted dying is both unethical and unnecessary.</p> <p>I believe it to be unethical because the doctors and pharmacists who would be required to assess competency or provide drugs would have such actions on their conscience for the rest of their lives. They might feel forced to leave their professions if they were required or felt pressurised into performing these tasks.</p> <p>I believe it to be unethical because people living with a terminal illness and becoming increasingly infirm might feel under considerable pressure not to be a burden on their families, and there is a real danger that they would ask for assisted dying not because they wanted to but because they felt they should. I believe there is an even greater danger to those who are vulnerable and could be forced to ask for assisted dying. No legislation could prevent this happening.</p> <p>I believe it to be unethical because it is wrong to ask for any individual, in a personal or professional position, to take such a decision as to end your own or to help end someone else's life, to advise for assisted dying or to collect or provide drugs to enable assisted dying. My father was very sick with Parkinson's. I have seen myself the trauma to himself and those, including myself, who cared for him. Despite this, even when he was at his worst, I believe he still had a good quality of life, enjoying relationships, conversation, nature. He was sad, as we all were, that his life was nearing its end, but I don't believe he would have wanted to end it sooner. He died from natural causes. If he had been in a position to ask us to help him die, I could not have lived with helping him to do that, even if it had been what he wanted. Recently our dog was terminally ill and we made the decision to call in the vet to end the dog's life. It was traumatic from beginning to end. How much more so for a person you love dearly. I believe the law is right as</p>	Not Answered	<p>To recap:</p> <p>1. It places too heavy a burden on the consciences of health professionals, friends and relatives.</p> <p>2. I am concerned about the pressure to not be a burden on family, and the worries of the patient about the cost of long-term or palliative care to themselves or family. There's a danger that vulnerable people could be coerced into assisted dying for financial or other reasons.</p> <p>3. My personal experiences of my father's illness. Though he was terminally ill, he still experienced a good quality of life. we enjoyed his company and he enjoyed ours.</p> <p>4. I believe that rather than legalising assisted dying, we should be ensuring that first class health care, support and palliative care is available to all, irrespective of ability to afford it.</p> <p>I believe the law is right as it stands. It should protect citizens from the trauma and the pressure, even the possibility of the decision to end your own life for whatever reason.</p> <p>I also strongly believe that plans for the assisted dying bill should be fully open for scrutiny before any further legislative steps are taken.</p>
Disagree	<p>I value the sanctity of life despite how hard it may seem to live while there is life it isn't down to humanity to decide what lives are worth living.</p> <p>There should be no limits on life expectancy as no matter how qualified no human can define how long is life worth living or not.</p>	Not Answered	<p>Think we should support people to value life and bring hope to a Sufferer coming to terms with the difficulty of a life filled with physical pain or suffering.</p>
Disagree	<p>The consequences of changing the law are detrimental to society. In particular, anyone who has a terminal illness will feel under some degree of pressure to terminate, because of the perceived financial, emotional, practical or other cost to other people. The right to die will quickly become a duty in order to avoid those costs.</p>	Not Answered	
Disagree	<p>Access to quality end of life care</p>	Not Answered	<p>The wording in this survey is steering people to say "yes" towards assisted dying.</p>

	<p>Disagree</p> <p>I feel there will be more vulnerability with disabled people or those with chronic illnesses either perhaps feeling they are better off dead or having pressure put on them by not being able to access proper palliate care or by family members or carers, sometimes with ulterior motives. I am worried that the process of dying by drugs etc can go wrong and/or be horribly painful, or drawn out as is evident in executions gone wrong.</p> <p>Wh will decide who is 'eligible' for assisted suicide? What age barrier (lower and upper limits) would be in place for people who want to make this decision for themselves or indeed for people who are having the decision made on their behalf?. What reasons will be acceptable/ Finding life difficult? Not being able to cope? We have seen youngsters been able to go through choosing a different gender, go through the physical process and then change their minds and not be able to revert to the gender they were born. Legalising assisted dying could become open to widespread abuse possibly even in a democracy. Do we ever have the right to take a life or help someone end their life? Doesn't this negate the many many organisations like Samaritans that exist to help people through despondent times?</p>	<p>Not Answered</p>	<p>Please reconsider and put more money into hospices (many of which only get charity funding) and palliative care</p>
	<p>Disagree</p> <p>I am opposed to terminating all life and see no reason to make an exception for the terminally ill. God alone has the right to end a life and there have been numerous instances of people living many months, sometimes years, after being diagnosed as terminally ill, many of whom have made quite miraculous recoveries.</p> <p>The terminally ill are not simply a statistic but someone’s beloved mother, father, brother or sister and every day they have with them is precious. In addition to which, many have made decisions of eternal consequence in those final last months that you propose to rob them of.</p> <p>I realise of course that the underlying reason for this push for euthanasia is purely an economic one, but life cannot be measured in pounds and pence. It is sacred.</p> <p>As you make a decision please bear in mind that it may be your life or that of a beloved family member being weighed in the balance at some time in the future and vote for LIFE while you still can !</p>	<p>Other</p> <p>Nobody should be euthanised. It’s a form of murder</p>	<p>There should be at least a period of 90 days to give the individual an opportunity to change their mind</p> <p>However I personally believe euthanasia is wrong in EVERY instance</p>

Disagree	<p>It is better to provide adequate support and care in the later stages of illness than to hasten its termination.</p> <p>Compassionate, professional care was developed by Dame Cecily Saunders in the Hospice Movement, which remains a pattern for today.</p> <p>Much can be done to alleviate pain and other distressing symptoms of illness, and such measures should be provided by the attendant medical practitioner. The aim is not to strive officiously to keep alive, but to make the patient comfortable.</p> <p>Human beings are special and should be considered as having innate worth, not to be finished off as a cow or pig.</p>	Not Answered	<p>Economic considerations must inevitably influence the decision to help a person to die. Pressure will be applied leading the vulnerable to end their lives, through not providing facilities or finance for their continued care.</p> <p>Certain doctors gain satisfaction from the power they yield over their patients, as exemplified by Dr Harold Shipman.</p> <p>The Final Solution was also promoted by Adolf Hitler in the quest for a purer Aryan race.</p>
Disagree	<p>My concern is that so-called 'safe-guards' are short lived and ineffective, as demonstrated with the Netherlands, Canada and Belgium. Where does it end when society decides that assisted dying (AS) is justifiable?? In these countries statics verify that when there is a change of Law the mind-set of that culture begins to 'normalize killing'. The only safe-guard is to maintain that AS is illegal.</p> <p>Futhermore we are reminded by polictians that we the public must take seriously the advice given by the'experts'. This has not been the case in Briton , where leading authorities The Royal College of GP's, disability right groups Palliative Medicine of GB and Ireland etc have unanimously opposed this proposal, yet their expertise have been blatantly undermined.</p>	Not Answered	<p>Please refer to my response to Q8 as I feel it is pertinent.</p> <p>In addition AS does not address the answer to the fear of pain. It is an established fact that 'good palliative treatment' is able to controll this and enhance quality of life. The fact is the drugs offered to terminate life can cause intense suffering. Making AS ligitamate would encourage funds to be diverted from investing in palliative care. Vulnerable individuals are placed at risk as they may feel a burden to family members also pressured against their wills to take this route.</p> <p>It is unethical and immoral to suggest that: conscientious health professionals pharmacist and doctors should endorse lethal and unregulated drugs be kept in homes and potentially accessible by the community; futhermore care practice denied funding as a result of not participating in this act and practitioners dismissed.</p>
Disagree	<p>It is too open to abuse; it's a "slippery slope" and the elderly vulnerable who feel they're a burden will agree to it for the sake of their families.</p> <p>Other countries, such as Belgium and Canada, have demonstrated how assisted dying gathers momentum. It is a red line that should not UNDER ANY CIRCUMSTANCE be crossed. Palliative care is very good in the UK and this should be emphasised for its compassion and medical efficacy. It is not up to doctors to kill people: it's the opposite of what their job and calling is which is to give life.</p>	Not Answered	<p>Many of the above questions make the assumption that I agree to assisted dying and that it's about the details of how the process should work. I do not agree with it under any circumstances, so I have not answered them, as it's irrelevant from my perspective.</p>
Disagree	<p>A change in the law puts pressure on vulnerable people to end their lives in order not to be a burden on others.</p> <p>It would also damage the doctor/patient relationship</p> <p>The current law protects against abuse</p>	Not Answered	
Disagree	<p>Younger relatives could, for financial motives or for convenience - put pressure on terminally ill adult relatives - and even some who are not terminally ill - to end their lives.</p>	Not Answered	<p>I think it's very regretable that you are even considering such a thing.</p>
Disagree	<p>My main concern for this particular subject, is that people will be pressured into feeling it's their obligation to take the assisted dying option.</p>	Not Answered	No

Disagree	I believe that all life should be protected and is precious. Those who are vulnerable and feel they maybe a burden on family may be coerced to follow a route to euthanasia. Unscrupulous family members may encourage a choice of euthanasia for elderly or terminally ill people so that perceived inheritance won't be used for long term care costs. If assisted dying is allowed it will put a strain on medical staff whose role is to save lives.	Other	I do not agree that anyone should be assisted to die.	Capital punishment was abolished in this country and yet it appears in the present day, that people who have not committed heinous crimes will be encouraged to seek the end of their own life for reasons of age, illness or feeling a burden to others. Medical staff may eventually be forced to agree to aid assisted dying even if it's against their moral or religious beliefs.
Disagree	I think that assisted dying has the potential to become uncontrollable, what begins as a law to encompass a few terminally ill people can quickly expand to including an increased number of cases (mentally ill, disabled etc) as seen in other countries such as Canada. I feel this is unacceptable as the law then becomes a tool to distinguish peoples value based on uncontrollable conditions. I also feel it is unnecessary considering we have an excellent palliative care and hospice service on the island which aids with dignified dying. I think it is unethical to pose the option of assisted dying when a vast majority of the people who would be eligible for this are at risk of abuse and may already feel like a burden and therefore would be easily convinced or coerced to engage with assisted suicide, fearing this is the only option. I'm sure many people could bring to mind an example when assisted dying appears the favourable/ kindest option but I do not believe we should change the law in favour of this, as I fear these cases are exceptional and the majority who engage with assisted dying would not fit this category. My fear is this is an extremely slippery slope, one the Isle of Man should not become infamous for.	Not Answered		I would argue this bill should be changed to "assisted suicide" as this is a more accurate term for what is being proposed
Disagree	There is potential for abuse. There is sometimes potential for recovery from illness, or misdiagnosis. I also fear that the law would be altered in the future as it has been in Canada, meaning more and more people who aren't terminally ill may access assisted dying.	Not Answered		As a qualified social worker, I can see the potential for abuse if assisted dying was legalised. I believe this is extremely unsafe, particularly as we've seen in other countries that the law changed - making this a very slippery slope.
Disagree	I realize the agony of having a close relative living with you whose life is virtually unbearable, the question inevitably crosses your mind that it would be better for that person to be relieved from that form of existence. However, having witnessed a shortening of a person's life, has left me guilty and full of questions. This life is so short and all of our suffering comes to an end eventually. Therefore, every person should be given the care and human comfort available up to the end. We do not understand and comprehend the guilt of the person who administers the termination nor the person who witnesses it. Nobody talks about this aspect but we can see the nervous breakdown in some doctors and we talk about them just being overworked!	For over 5 years		
Disagree	We all have to die and should do so naturally not induced	Not Answered		

Disagree	People are easily swayed into agreeing that there is no hope/they are a burden/they'd be helping others (e.g. financially). Coercion in the process may not be obvious. Once done, it can't be reversed!	Not Answered	
Disagree	<p>*This is not the right bill. It does not help those with long term conditions or pain that are not terminal.</p> <p>* It paves the way for an uncaring society and a short step to eugenics. Life is precious and even terminal illness can bring unexpected joy (family reunions and peaceful death with good palliative care and pain medication) it implies that end of life is not valuable.</p> <p>*Vulnerable people could be persuaded to end their lives by relatives or even society can put pressure on those who are deemed less useful, as has happened in some countries where it is legal.</p> <p>*With all such legalisation what starts off with reasonable restrictions and safe guards soon become more lax and anyone such as children, grieving, depressed, old, disabled, vulnerable, eventually will be able to legally be assisted to kill themselves or euthanised.</p> <p>* Has the IOM government thought through implications to our own health service? Pressure on doctors who do not want part of this. What about ill people coming here with six months to live and the impact on our health service not to mention the huge expense to our tax payers.</p> <p>* This bill is not about choice. If someone wants to commit suicide they don't need a Dr to administer pills etc, they need support, care and understanding.</p>	Not Answered	<p>I do not agree with assisted dying</p> <p>*Most of these questions including this question no 28 assume the bill will be passed. The detail is not relevant if you believe that this Bill is morally wrong.</p> <p>*I feel the questionnaire itself is flawed. I did not answer the leading questions.</p> <p>*There needs a lot more consideration of the implications to our society, particularly for those who are most a risk of such legalisation.</p> <p>*Are MHK's going to discuss implications of such legalisation learning from what has happened where this is legal ? Some statistics are shocking, palliative care almost non existent in these places, encouragement of those deemed ill, unfit, old, disabled or depressed to seek suicide rather than support.</p> <p>*Money should be there to support people emotionally and pain medication freely and expertly given to conditions where pain is an issue.</p> <p>Are we a caring community ? For every genuine case requested there will be many cases of misuse or manipulation of the vulnerable.</p>
Disagree	Life is sacrosanct, so precious and no matter how well regulated on paper the policy could be, the risk exist that it could be abused. We know such an abuse cannot be corrected as the dead cannot be brought back to life.	Not Answered	No. Please do not proceed with it.
Disagree	We are created in God's image, life and death are in the Hands of GOD not with Human-beings.	Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	Please don't approve this bill!!

Disagree		Not Answered	<p>It is not needed, we have a very high quality of Palliative Care on the Island. Both in the Hospice inpatient Unit and in the Community in patient's homes through Hospice at Home and District Nurses. Where pain and symptoms are well controlled and individuals are treated with respect and dignity in their last months and days.</p> <p>I have great concerns about vulnerable adults and there being financial and emotional pressure and abuse as well as coercion if assisted dying is passed.</p> <p>Doctors do not always know an exact length of time when it comes to prognosis and have the potential to misjudge this. This could lead to a individual shortening their life unnecessarily.</p> <p>Could potentially be very emotionally distressing for relatives.</p> <p>People may mentally change how they feel and individuals are likely to have good and bad days/weeks when dealing with a terminal diagnosis, therefore this choice is too great a risk.</p>
Disagree		Not Answered	<p>It could be emotionally distressing for relatives.</p> <p>We have a very high standard of palliative care.</p> <p>It is very hard to safeguard vulnerable adults.</p> <p>This could give the name for the island for the place to go and kill yourself.</p>
Disagree	If it gets into Isle of Man it is likely to move to other parts of the UK	Not Answered	<p>The whole thing is wrong and should never be suggested, contemplated or spoken of, it is evil, murder.</p>

Disagree	<p>There is no need for anyone to die in pain with our excellent palliative care services. Money would be better spent on equipping this service.</p> <p>Disability groups are against this bill as they have seen in other countries where there is euthanasia, that the law quickly broadens to include disabilities, and even mental health, and there are hideous stories of people being offered euthanasia in these countries with non-fatal illnesses, as well as things like PTSD and even post-natal depression. There is a risk of coercion of the vulnerable, a huge percentage of those wishing to end their lives in this way state that ‘not being a burden’ was a primary reason. The other thing is that I’ve talked to so many medical staff who are against it. At the moment the bill would allow for conscientious injectors but as we have seen in other countries who have introduced euthanasia, this becomes more difficult and pressure on medical staff to take part increases. If this bill is passed it may put medical staff off coming to the island where it is hard enough to recruit enough nursing care.</p> <p>There are many other reasons. I also believe these comments go straight to Dr Allinsons office which, if true, actually makes a mockery of the whole process - why would the person bringing the bill be the one the results go to, why is it not some unbiased government officer. The rest of the questions in this survey have a ridiculous bias, assuming we are in agreement with assisted dying.</p> <p>Also Life expectancy is notoriously hard to quantify. My mother-in-law was given 6months to live, and lived for another 7years, with a long period of remission which enabled her to see her son married and her grandchild born - people in her position may have opted to die not realising that diseases (like ovarian cancer as she had) are not always as easy to define and predict as Dr Allinson would have us believe.</p>	Not Answered	<p>This process seems heavily weighted and flawed. Palliative care medics were not consulted, surely that was the most obvious group to comment. The questions, have a bias towards an affirmative answer to question 8, and an independent assessor should be receiving comments not the one who drew up the bill!</p>
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Disagree	<p>Dear Sirs,</p> <p>As a Christian I don't believe anyone has the right to end the life of a human being, including the person whose life is in question. Only God can give life and it should be only God who decides when a life is to end. Also in instances where a law permitting assisted suicide has been passed, it is well known that the qualifications for such a practice have gradually grown increasingly specific and more accessible, e.g. Canada.</p> <p>I also believe that the passing of such a law would exert pressure on people who might feel (or be made to feel) that they are a burden to their families and friends, and thus persuade them to become willing to agree to end their lives.</p> <p>I believe the Government of the Isle of Man should seek to institute only palliative care for terminally ill people. We all know that effective palliative care can sometimes hasten a patient's death, but that is very different from assisted suicide, as I'm certain your Government and medical teams are very well aware. Also, having been present at my husband's and many others' care and death, I do believe that pain and distress relief is always the ethical option.</p> <p>I do hope you will recognise that the passing of such a law would be man playing God, a highly dangerous position to adopt - God is not mocked.</p> <p>Yours faithfully, Sheila Gibson</p>	Not Answered	<p>A warning that those who choose to assist dying while at the same time being willing to withhold effective palliative care are seen and known by Almighty God. We all will die one day. The Bible tells us that it is appointed to man once to die and after this the judgment. (Hebrews 9:27). Is everyone promoting and being willing to carry out this Bill prepared for that?</p>
Disagree	<p>God only give us life, God only can take it</p>	Not Answered	<p>It is facing death when we may think about God, and remember Jesus paying for our sins ..and even ask Him for his help and the family</p>
Disagree	<p>Life is given by God and it is not up to us to take someone else's life.</p> <p>There are so many dangers in allowing this legislation to pass. It can easily put pressure on the elderly or seriously ill - they begin to feel that they are a burden to their families, the health service or just society in general - they can think they are worth nothing. We should be concentrating on giving the ill and elderly the love and care they need, not suggesting that their lives are worth nothing and they would be better off dead.</p>	Not Answered	<p>I was puzzled by the tone of the consultation. Many of the questions seem to assume that assisted suicide will become law and that you are just looking for how best to introduce it. I pray it never happens and that the elderly and ill are protected and not helped to die.</p>

Disagree	<p>It is a crime to assist a person to commit suicide.</p> <p>All the major disability rights groups in the UK, including Not Dead Yet UK, SCOPE, Disability Rights UK and the United Kingdom's Disabled People's Council all oppose any changes to the law that would allow assisted suicide. They believe it will lead to more prejudice and pressure on those with disabilities to consider it as an option. This would not be a positive goal for the Isle of Man.</p> <p>According to the Royal College of Nursing (https://www.rcn.org.uk/library/subject-guides/pain#:~:text=Assessing%20and%20managing%20pain%20are,setting%20and%20the%20age%20spectrum.), pain is ‘a complex physical, psychological and social phenomenon that is uniquely subjective’. Consequently, there is no agreement on what should be regarded as subjective suffering, particularly as the various types of pain and suffering will be handled very differently by two different people. This becomes evident when we look at those with terminal illnesses who manage to handle their difficulty well. Who would be able to make a judgement on how much pain or suffering someone is experiencing and whether this meets the standard required to qualify for assisted suicide?</p> <p>Parliament has debated assisted suicide and euthanasia provisions four times (https://www.carenotkilling.org.uk/about/) since 2006 and rejected it. So should we in the Isle of Man.</p>	Not Answered	<p>No assisted dying for anyone, from anywhere.</p>	<p>There must be NO Assisted Dying!</p> <p>We, in the Isle of Man, want to assist people to live and not to die.</p> <p>There would be a risk to healthcare professionals.</p> <p>There would be a risk of coercion of vulnerable groups.</p> <p>There would be a risk of devaluing the lives of specific groups.</p> <p>This is, disappointingly, a very biased and unbalanced questionnaire.</p> <p>Most of the questions pertain to choices regarding provision, once legalized... as though it was already decided.</p> <p>There should have been deep discussion on the impact of such a law on Manx society.</p>
Disagree	<p>It puts pressure on seriously ill people and the disabled who fear they may become a burden on others</p> <p>There could be abuses where there are insufficient safeguards in place</p> <p>Funding for palliative care may be denied to hospices who do not wish to use assisted suicide</p>	Not Answered		<p>In my view assisted dying is assisted suicide. Vulnerable people are at risk of being pressured into taking their own life. Assisted dying is not pain free or quick It can be a slow and painful experience. Where assisted suicide has been introduced the number of suicides also increases. Funding for palliative care is often denied to institutions who choose not to use assisted suicide No one has the right to help another person take his or her own life</p>
Disagree	<p>It pulls the rug out from vulnerable folk, exposes them to coercion and exploitation; is largely a cynical uncompassionate response to a person in need of care. Suicidal thoughts are often if not usually transient. Euthanasia would kill many who would retain a quality of life if given the care they need. The act of euthanasia is itself often long drawn out, painful and distressing. It is not the short easy way out many imagine it to be.</p> <p>As a former health care provider I am also very concerned for the pressure my medical and nursing colleagues may come under to work against their consciences despite their ethical scruples and against their professional code of conduct.</p> <p>Far from having proved safe and effective in countries where legalised, it has mushroomed and terrifies the normal patient. The victims are of course no longer able to share their experiences as they have been silenced by death.</p>	Other	<p>I don't think anyone should be eligible</p>	

Agree	People who have the capacity to do so should have the right to choose assisted dying. Palliative care for terminally ill individuals can be painful, drawn out and distressing not only for the individual but for their family and loved ones. Giving mentally competent people the choice to implement assisted dying, I regard as a basic human right and it's time people were given the right to choose for themselves. Provided the correct safeguarding measures are in place, there is no reason why this should not be passed and terminally ill individuals be given the power to make their own decisions about their own lives.	Not Answered		When factoring the safeguarding issues imposed to deem someone suitable for assisted dying, we must consider people on an individual case basis. Some individuals will have the ability to lift a pen and sign a form, others will not due to frailty or degenerative conditions. It cannot be one size fits all. There must be clear guidelines, yes, however, not every case can be carried out in exactly the same step by step process. It has to be personalised to that individual to meet their needs fully.
Agree	Having watched 3 people die of terminal illness (parents and brother) whilst pain was controlled as much as possible, their last few weeks were absolutely dreadful for both us and them. They wanted to die as they knew exactly what was happening and knew death was imminent , and we wanted them to die out of kindness and compassion. Had we let our dog suffer in the way they did we would have been prosecuted for cruelty.	Not Answered	ALL PEOPLE deserve this option. It would be ridiculous to get people to come and live here just to be able to qualify for residency for this purpose. (Just though about this and on a financil thought, why would we want to be paying for thier medical treatment for a year or what ever so tey can then qualify and their families then leave the island and return to their previous home. can die and	I said yes to the should their person sign a consent, but if they are not physically able to sign, the doctor who has seen them should be able to sign on their behalf in their presence.
Agree	All four of my grandparents suffered greatly in their final years. My grandmother had both her legs amputated above the knee due to circulation problems in her feet and lower leg. She had no quality of life and needed help to do anything. My grandfather had a stroke for many years and was effectively trapped in two rooms in his house and eventually in a nursing home prior to his death. My other grandfather became infirm and very poorly for an extended period prior to his death. My other grandmother had stomach cancer, she went into hospital and never escaped with humiliating tubes up her nose and trapped next to her hospital bed on a ward. They all often said that 'they would put an animal out of its misery, but we get have to suffer'. It is clear that they all wanted to be put out of their misery.	Other	One month, to confirm that they are making the decision of their own free will	<p>There are many people/organisations that benefit greatly from keeping people alive. I have visited nursing homes to see many people in a persistent vegetative state. Are they drugged to keep them quiet? Do they have any idea what is going on around them? Are they being kept alive to allow a few people to get rich quick? A lot of these people would want to be put out of their misery, I know I would.</p> <p>When my quality of life has deteriorated to the point that I require humiliating assistance just to live each day, I would want to be put out of my misery.</p> <p>I would like to publically thank Dr Allinson MHK for progressing this matter and I have total faith in him to deliver this legislation.</p>
Disagree	To put it succinctly, I am most concerned about the effect of the proposed change on the weak and vulnerable members of society. They would be exploited by eugenicists. I am also concerned about the pressure that could be applied to health professionals to do things that their consciences do not permit.	For over 5 years		

Disagree	<p>God, or The Lord says He is the only One who gives life and takes life.(Deuteronomy, chapter 30 verse 20. 'For He is your life and the length of your days.).There are more verses like this too.</p> <p>God wants everyone to go to Heaven , to be with Him forever,. Only He knows those who have made a decision to be in a relationship with Him and have had their sins forgiven and eligible for that safe place--heaven. If we interfere in His work and assist someone to die before God's time , we MAY be robbing them of a place in heaven. No one in their rightful mind would wish to go to the other place---hell.</p> <p>Read Luke chapter 16 from verse 19 to end. We need to take note of the warnings God gives us ,as each of us will have to face Him one day.If we have taken part in anything against Him, we will face His wrath. In this chapter we learn a little about the 2 places there are for us ,after this life on His earth.</p> <p>Many people live with out knowing about our future life. I care very much for people and if the opportunity arises ,I try to warn them.</p> <p>We must be careful not to do anything which will incur God's wrath, by interfering in His work. This is His work as only He gives life and He takes it. He calls it murder.</p>	Not Answered	Some of the questions have not been answered as I don't agree with assisted dying.
Disagree	<p>I fundamentally disagree with assisted dying. As well as going against Christian principles, it is more compassionate to focus on palliative care than assisted dying.</p>	Other	<p>I do not believe ANY people should be permitted!</p>

Disagree	<p>Palliative medicine already balances the need for powerful pain-relieving medication against the risk of death being hastened by such drugs. This is in the very last days or hours of a person's life, with all attempts made to prolong life. Assistance to die is an ethically prohibited and unnecessary measure and has the clear potential of escalation into manslaughter, as has been seen in other jurisdictions around the world.</p>	Other	<p>The background to the question seems to be acceptance of the proposed assisted suicide concept. I do not agree that the concept is valid, so I cannot answer in those terms.</p>	<p>I close with a 1st March 2021 quote from 'Care Not Killing', see https://www.carenotkilling.org.uk/articles/oregon-assisted-suicides-jump-28/"</p> <p>245 Oregonians died by assisted suicide in 2020. This figure represents a 28% jump from 191 in 2019, and is more than nine times as many as died in 2000. Oregon is a comparatively small state with a population of 4.2million; those 245 deaths would extrapolate to some 3,880 for a UK-sized population. MPs trying to understand that figure might consider that it is more than four and a half times as many suicides assisted as there are patients just across from Parliament in St Thomas' Hospital.</p> <p>We are often told that assisted suicide can be closely monitored, yet of the 370 prescriptions for lethal drugs issued in 2020, the ingestion status is unknown in 80 cases; we don't even know if 44 of those are still alive.</p> <p>Advocates of assisted suicide who try to bat away warnings of incremental extension can no longer claim that the Oregon law has remain unamended:</p> <p>'The DWDA now provides an exemption to the statutory waiting periods for patients expected to live fewer than 15 days from the time of their first oral request for medication. In 2020, 75 patients (20%) were given exemptions.'</p> "
Disagree	<p>Nobody should be given an option to end their own life. The IOM has good palliative care where nobody needs to suffer in pain in their final days. Also, how long before this option would be extended to those with mental health problems, genetic disorders etc under the 'human rights' banner. Wrong on many levels.</p>	Not Answered		<p>The majority of the questions in this consultation are grossly biased in favour of assisted dying. Answering most of these questions would seem to indicate that a person is in support of this bill when I WHOLEHEARTEDLY DISAGREE, hence why I have not answered a lot of them!!</p>

Disagree	<p>When I was a palliative care nurse, I had the privilege of caring for many terminally ill patients and their families'. I saw many people admitted with distressing symptoms respond to good symptom control and regain a quality of life that enabled them to spend quality time with friends and family until their natural end. The care given was holistic, so not just physical, but psychological, spiritual and social problems were addressed too. The hospice was well staffed, so we were able to give quality care to our patients and to support their families through this time. In my experience I saw very few patients with symptoms that could not be improved by palliative medicine and care. I saw many patients admitted who were able to return home once their symptoms were treated, and I know that with many terminal illnesses it is very difficult to predict just how long someone has left to live. I believe that the Isle of Man Government should be looking into how to better support and fund the palliative care work on the island rather than passing this bill.</p> <p>I think if this bill was passed vulnerable people could be at risk and the trust and integrity of doctors and nurses compromised.</p> <p>As a practising Christian I believe that it is wrong to take another person's life.</p>	Not Answered	
Disagree	<p>I don't think anyone should be actively assisted to die. But I do believe that if treatment, like medication, is artificially keeping someone alive and suffering when they would naturally pass away, that should be stopped. Providing the person is capable of deciding if that's the best and most humane course of action for them.</p>	Not Answered	There are some questions I've not answered because I don't agree that assisted dying should be offered or available to anyone.
Disagree	<p>I am very afraid that with assisted dying for the vulnerable who feel they may be a burden they will feel or made to feel they should have assisted dying even if they don't want it.</p> <p>Once a chink is opened it is the slippery slope to a greater opening of the door to euthanasia and in the Netherlands and Canada this is clearly seen. Where does the line get drawn?</p> <p>As a retired nurse I have cared for many dying people and the best experience for the dying and for the family is good end of life care. There is great dignity here. Always when someone has expressed a wish to die they have changed their mind soon after.</p>	Not Answered	
Disagree	<p>Difficult to be sure of how long a person will still live. Have seen many cases of people who's life expectancy was predicted to be a few months, but ended up living for many more years. It is a very unethical option to give someone.</p>	Not Answered	A much more suitable and ethical alternative would be investing in professional care to people with a possible close death.
Disagree	<p>People should be given hope in living and not assisted to die. More compassion and care should be offered. Also, the good work done in suicide prevention campaigns and for patients with mental health challenges will suffer if assisted suicide is made available.</p>	Not Answered	

Disagree	Life is sanctified and permitting people to get assistance to end their own life firstly makes human life of no worth but more worryingly may open the flood gates for abuse, especially for those who are mentally or physically vulnerable. The world is saddened by suicide when it is reported upon; the tragedy of a life brought to an abrupt end-permitting this to happen is aiding and abetting tragedy, and will undoubtedly be abused for nefarious purposes.	Other	I do not agree to any of the previous three statements	PI are see my previous comment
Disagree	Life is a God given gift, even in difficult circumstances it is not for us to take it away. Modern medicine can make even the worst condition bearable, and our response must be to love and care for the suffering, letting them know how loved and precious they are.	Not Answered		A strong advice on the seriousness and even hopelessness of such a decision
Disagree	I believe that agreeing to assisted suicide gives the impression that some lives are not as valuable as others, whereas I believe we are all equally valuable.	Other	These last few questions no matter how I answered would make me imply that I agreed with assisted suicide, whereas I definitely don't	I have every sympathy with those in extreme pain, but we have ample pain killers and hospice care, without going down the assisted suicide route, which then makes others feel that they are of no value in society.
Disagree	A close family member of mine is dying from a brain tumour (inoperable) but she's still with us, still smiling and giving enormous encouragement to the family. We may still see a miracle. But this becoming law, taking away their right to decide, giving it to family members, some of which they may not be close to, sends a message of hopefulness. In time palliative care will become less and less, with knock off effects from doctors (like "who cares") and the value of human life ends.	Not Answered		Just don't do it

Disagree	<p>I write to you as a registered nurse with 30 years experience within the NHS, HM armed forces and as a Principal Lecturer employed within a School of Nursing.</p> <p>Can I ask that you abandon proposals for legislation permitting euthanasia and assisted suicide in the Isle of Man.</p> <p>The introduction of assisted dying would place Healthcare Assistants, Nursing Associates and Registered Nurses at the epicentre not only of patient decision-making, but as administrators of medication used to prematurely end the life of a human being. This would cause considerable moral distress for current healthcare professionals and render the nursing profession an unattractive career option for future generations of men, women and young people.</p> <p>Please be under no illusion that nursing staff would not only be required to prepare lethal dosages of barbiturates, but set-up intravenous delivery systems, monitor and observe IV infusions and intervene if the administration of the medication failed (as IV infusions occasionally do), whilst providing care and comfort to the patient and their family - please take some time to reflect on the absolute abhorrence of such a scenario.</p> <p>The introduction of legislation would completely undermine the development of end of life service provision within the island. It is vital that patients, service users and their families have opportunities to take part in high quality research and inquiry-based approaches which can transform</p>	Other	<p>I am completely opposed to MAID</p>	<p>This consultation questionnaire is clearly biased toward the adoption of MAID. To repeat, I am completely opposed to assisted dying.</p>
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Disagree	<p>Sanctity of life - there are no circumstances where it is ok to end someone's life prematurely, through their choice or another's choice. Once this principle is broken, even for very limited circumstances, there are many consequences and some of the general themes I see are</p> <ul style="list-style-type: none">- Where to draw the line. Despite best intentions, there is no way to draw a definitive and distinct line. Not only is it dependent on individual judgement which will vary, but the future and medical outcomes have degrees of uncertainty. For any given "line" there will be circumstances which are very close to this and arguably also acceptable, then for those cases it will be the same, it is not possible to be definitive. I have not answered later questions which are trying to define this line such as limit on life expectancy for that reason.- Extending this, practice elsewhere in the world has shown that there will always be supporters of expanding the scope of assisted dying & suicide. Mental illnesses which are ultimately terminal, disability/quality of life, euthanasia. Once the principle is broken it is the start of the "slippery slope"- Mistakes happen which can have terrible implications. Healthcare professionals involved in the process, friends and relatives and of course the person who is terminally ill- Linked to this and where to draw the line, healthcare professionals no longer have an absolute position as an anchor, either in dealing with patients/friends/relatives or in making their own judgements. This would lead to incredibly difficult discussions and decisions and for many lead to stress and worse. We should not place them in this position- I lived abroad for many years in a country that permitted assisted dying. I	Not Answered	<p>As noted in my response to question 8, it is impossible to draw a definitive line between where it is acceptable or not to assist someone in dying. Some of the questions in this consultation were relevant to the points I raised, and many of the others highlighted additional areas which are problematic and where it is not possible to be definitive. The implications of that are severe for the health service and for anyone linked to those who are dying.</p> <p>Aside from that. I'm hitting retirement and understand from many personal experiences the terrible suffering associated terminal illness.</p> <p>Incredibly difficult as it is to go through this, I also have first hand experience from my time abroad of families who have gone through the process of assisted dying. We are very fortunate in the Island to have good palliative care and I am convinced that a natural end to life with that care is by far the better option.</p>
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Disagree	<p>On your consultation website I read the following: "Where assisted dying is legal the evidence shows that such laws are safe and effective." This is simply untrue for many reasons, some of which follow. First and foremost, such a change in the law has the inevitable effect of making vulnerable people review their own worth. People with terminal illnesses will feel the pressure from society to end their lives; in other words, it will not take much to change the 'right' to die into a 'duty' to die. Take the State of Oregon as an example. The Oregon Death with Dignity Act: 2021 Data Summary states that over half of those who died by assisted suicide in 2019 and 2020 gave as the reason for ending their lives the fear of being a burden on others. As for the process of euthanasia, the very drugs that are used in the process of inducing death have not undergone rigorous testing. Some people have taken over 100 hours to die, making death distressing and drawn out. And what does sanctioned suicide say to those who have worked hard to prevent suicide? What does it have to say to those who have depression and other mental health conditions?</p> <p>The safety of assisted dying has not been assured in nations which have already legalised it. The evidence does not show that such laws are safe. Canada, for example, introduced euthanasia and assisted suicide in 2016, but it has already scrapped the requirement for a person's death to be 'reasonably foreseeable.' Indeed, Canadian law-makers have voted to widen the law to include people with mental illness. There are even calls in Canada to lower the age for euthanasia, and to kill newborns who are disabled. Belgium's 2002 law on euthanasia was originally confined to adults. In 2014 it was extended to include children. It is applied to people with the first symptoms of Alzheimer's as well as to people struggling with</p>	Not Answered		
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Disagree	<p>In the Bible, the sixth commandment states, 'You shall not murder' (Exodus 20:13). Suicide is self-murder. To assist someone in self-murder is also murder. This is currently recognised in the Isle of Man's Criminal Law Act 1981: 'A person who aids, abets, counsels or procures the suicide of another, or an attempt by another to commit suicide, shall be guilty of an offence and shall be liable ...'</p> <p>The current legislation is in keeping with the Government's God-given role 'for the punishment of evildoers and for the praise of those who do good' (1 Peter 2:14). To pass legislation to overturn this and allow assisted self-murder goes directly against God's law and is rebellion against God.</p> <p>Rebellion against God will bring His judgment. Therefore, if this legislation is brought in then Dr. Allinson, and all who vote for it, will have to give an account before their Creator on the Day of Judgement, not just for this sin, but for for all the sins they have committed.</p> <p>Therefore, I urge Dr. Allinson, and all of the MHKs, to vote against this Bill, and repent of all their sins and cast themselves on the mercy of God for the forgiveness of their sins by the blood of Jesus Christ.</p>	Not Answered		
Disagree	Individuals could be subtly pressurised into agreeing by those who stand to gain ,or are inconvenienced by care of the sick person.	Other	I feel it is our duty to care for all people who come to our Island	This is a very complex issue indeed,take great thought when discussing this,it is better to keep life sacred.
Disagree	<p>I totally disagree with assisted dying. I think it places an unnecessary burden on the patient, the family, the doctor and friends. I believe that life is sacred and we have marvellous Hospice services here on the island. We should work to increase these services if needed rather than simply give a very ill person what would be a very hard decision to end their life. The burdon of responsibility and guilt for them would be immense and very heavy to bear. Also terminally ill sometimes does not mean a short life. We should be looking after each other in our end of life stages not helping each other to commit suicide. Assisted dying is someone helping you to commit suicide which is outrageous. Also where does it end? Life is hard even when you are not terminally ill - it is the beginning of a dangerous road to go down.The very fact that you mention a change of mind in your questions here says it all. People's mental health is very vulnerable at this time of their lives. Also pain relief has gone an awful long way - I think that unbearable pain in a Hospice is rare. There is always good pain relief - I do not think that "unbearable pain" is something that Hospice cannot cope with. Please leave well alone from this dangerous step. Let us support caring instead of killing.</p>	Not Answered		<p>I have not answered some of the above questions as I AM TOTALLY AGAINST THIS BILL - it is incomprehensible to me that you would be even considering this. The questions on changing ones's mind and storing medicines at home are outrageous. You have a great responsibility to stop this Bill going through. Once it is out there there is no going back. Support our sick by managing their life not their death.</p>

Disagree	I believe that palliative care should be funded more fully as I believe in the sanctity of life. All following questions are therefore subject to reference to this, my primary belief	Other	Manx citizens only - By marriage, birthright, adoption	I am strongly against this bill being made law. Although recognising discussion can be helpful. As a Christian I cannot support it. I believe it to be assisted suicide.
Disagree	<p>I believe it is not a "right" to die. The bill may be called assisted dying, but it essentially assisted suicide, or worse.</p> <p>I other countries, such as Canada, the law has then morphed into something very different to its first incarnation. The extension of Canada's euthanasia law has changed from terminally ill, to chronically ill and disabled, to mentally ill...) I have a son with a chromosome disorder and mental health issues as a result of his severe development delay issues, and I would not want a bill to evolve into something that could result in him being "assisted to die" because he becomes a burden, expensive or difficult to support.</p> <p>It appears, from surveys, that the majority of medical professionals disagree with this type of law too. How would you expect we attract quality healthcare professionals to the Island if we bring in such law?</p> <p>I also believe it is unnecessary, as the Island, as I'm sure Dr Allinson would agree, has first class palliative care, and therefore, nobody has to "suffer" in their last days on this Island. I have seen the quality of this end of life care through family members.</p>	Not Answered		<p>*Response submitted in hard copy"</p> <p>Firstly, I feel that this questionnaire is loaded and weighted in favour of assisted dying, and that by answering all of the questions I would actually be adding weight against what I believe, hence I have skipped several questions that I believe are heavily one sided. This consultation appears to want to push this through rather than float it for public opinion. I would like to know who the responses go to for independent review. If it is Dr Allinson, then that further skews the process in my opinion. This should be a fair and independent consultation, not a data gathering exercise to back up a one sided approach.</p> <p>There is NO GREATER issue the Isle of Man Government could possibly ever discuss, than assisting the end of life. This has to be done fairly, thoroughly and erring on the side of caution, even if all of the data were to come out in favour. Once you open this particular pandoras box, it will eventually lead to relaxation of the original intentions and criteria over time, leading to selective assistance of more and more groups of people over time. The weak, vulnerable, sick will be the ones to suffer. Cost and convenience will begin to influence decisions in future and we will be removing burden from society with this method as it extends, as it has in Canada.</p> <p>Do you really want to put the decision for someone to die into the hands of our health care professionals, where currently their aim is to assist people to live?</p> <p>I believe that is a much bigger moral, societal issue than is being</p>
Agree	I have seen family and friends suffer unnecessary with no quality of life.	Not Answered		
Disagree	A society that removes human problems by removing human beings is a callous one that only grows more brutal. The 'cancel culture' seeks to remove inconvenient human life rather than seeking ways to help and support the vulnerable - which is every one of us at some stage in our lives. We want a society that grows in kindness, which happens when it looks after its young, sick and elderly.	Other	I do not agree with assisted suicide for anyone.	

Disagree	<p>People who have terminal illnesses will feel under pressure to end their lives. The right to die quickly turns into a duty to die.</p> <p>Both my parents were advocates of assisted dying until my Father became terminally ill, then assisted dying was not spoken of again and my Father lived a comfortable life for over 12 more months with the help of proper palliative care.</p> <p>Doctors involved in caring for terminally ill patients and the elderly do not want assisted suicide legalised. On the mainland, the Royal College of GPs, the Association for Palliative Medicine of Great Britain and Ireland and the British Geriatrics Society are all against it</p>	Not Answered	<p>It would be far better if the time, effort and resources being devoted to this bill be transferred to improving palliative care</p>
Disagree	<p>The idea of legalizing euthanasia on the Isle of Man may seem compassionate, but in reality, it would have negative consequences for the community.</p> <p>This is for the following reasons:</p> <p>1) Legalisation of intentional death has been shown to increase suicide rates in other jurisdictions. This is particularly concerning for marginal groups and young women, who are already the most vulnerable to suicide. Instead of increasing death, we should be focusing as a community on reducing it.</p> <p>2) The possibility of death tourism is morally abhorrent. The Isle of Man should be a place to come to live, not a place to come to die. Allowing euthanasia would send the message that the island is a place where people can go to end their lives, rather than a place where people can find support and care.</p> <p>3) Some proponents of euthanasia argue that it would be protected by strict regulations, but the reality is that the purported protections against incorrect medical judgement are insufficient. In jurisdictions where euthanasia is legal, there have been cases of people being euthanized without their clear informed consent, or without proper assessment of their condition.</p> <p>4) Another concern is the rise of euthanasia as a cure for mental illness in other jurisdictions. This is a very scary development, as mental illness is a</p>	Not Answered	<p>Many of the questions here are framed in such a manner as to exclude opponents of the proposal from being able to contribute in an honest manner. Thus, the fundamental mechanism of this consultation is unjust.</p>

Disagree	<p>It is completely unnecessary and will end up being a slippery slope that will enable and encourage people to have no hope and chose death over life as an answer for problems that people in power just don't want to give time or money too.</p> <p>I have been a care giver in end of life treatment and see this bill as completely unnecessary as everything is done in palliative care to prevent suffering.</p> <p>I have also witnessed a gentleman having all his paper work in order to go and have an assisted death (at a high cost , seems to be a money making business) in a foreign country around 5 years ago, he then decided to give the course for long term illness that we were on a chance before going. within a couple of weeks he had renewed hope and a complete change around in his heart, his views and situations. He was so relieved he tried an alternative to assisted suicide. Introducing this bill will lead to many unnecessary deaths and much heartache.</p>	Not Answered		<p>This bill should not go ahead.</p> <p>This survey is ridiculously biased</p>
Disagree		For over 5 years		
Disagree	<p>Assisted suicide sends the message that vulnerable people lives are not worth living. As we are made in the image of God, human life is always precious, not matter our age or physical condition.</p>	Not Answered		<p>There should definitely be no bill supporting assisted death. We as a society need to focus on supporting people to live life!</p>
Disagree	<p>The question below should have had the option of 'No'</p> <p>I strongly disagree that assisted dying should be permitted. Having witnessed the death of my mother after being passively pressurised by medical professionals to not object to a 'DNR' order that they had arbitrarily placed on her, I believe that all medical professionals should focus solely on treating patients and not causing them harm. I would not allow any family member of mine to enter a hospital where doctors are involved in assisting people whose judgement is inevitably negatively impaired by pain to die. Such people are extremely vulnerable and we should care and look after vulnerable members of society not help them kill themselves.</p>	Not Answered		<p>The government should be focusing on providing better and properly resourced palliative care, not looking for cheap and easy fixes by seeking to kill vulnerable people.</p>
Disagree	<p>People who have a terminal illness are susceptible to pressure to accept suicide. High quality palliative care honours life and that of tge patient. Hospice care is already offering this care for end-of-life patients. Assisted dying goes against the law proyecting us all from suicide.</p>	Not Answered		<p>Unscrupulous family members, who for gain, pressurize weakened patients to succomb to their desire for the early death of the patient. Also people with disabilities, as supported by Scope and Not Dead Yet, are also more vulnerable with a law supporting suicide of the patient.</p>
Disagree	<p>No one has a right to take a life even if they think they are helping to end the pain and suffering of the person.</p> <p>I know of a true story of someone in America who survived Euthanasia administered by the doctor when this patient did not want to go through with it. This person even though unconscious at the time, was unable to move experienced agonising pain worse than anything imaginable and lived to tell others Euthanasia should be banned completely. It is also a sin to take a life, and the patient also, God is the author of life and human beings are not.</p>	Other	<p>Questions 12 - 14 don't give much choice to what I believe to be .orally wrong. Euthanasia is morally wrong and evil</p>	<p>Some questions are irreverent to what I think in that Euthanasia should never become law. The options don't make sense. Taking a life is against God's Commandments , thou shall not murder.</p>

Disagree	I have seen the slippery slope in other countries eg. Netherlands, Belgium , Canada where the scope for euthanasia widens exponentially to include children , mentally ill people , disabled people , people suffering from poverty , loneliness . The law should protect the vulnerable and improve palliative care. Medical professionals should not be required to kill.	Not Answered		Drop the whole idea.
Agree	Avoidance of pain and suffering	Other	some concerns as to who might arrive from all parts of the world.	I have concern for those who have mental health as well as physical issues and find it hard to determine who would independently determine that they should be granted assisted dying.
Disagree	The reputational damage to our island is not worth any financial gain it may / may not provide. I don't see adding this facility to be beneficial for the excellent health service that we have, either for patients or medical professionals.	Not Answered		This questionnaire has clearly been written from a pro-euthanasia perspective. I have not answered many of the questions related to -how- euthanasia should be carried out because I do not think we should pass a law permitting it to be carried out under any circumstances. Let me be clear, I hope this bill is NOT passed, and that health professionals can carry on with the excellent job they do in caring for us. In addition, I hope that the current government looks closely at how this shameful consultation has been implemented as this questionnaire has not been presented to the electorate in a neutral manner.
Disagree	Il human life is God given and therefore sacred. Only God Himself has the right to take away life.	Not Answered	do not approve of assisted dying at all.	I go not approve of any form of assisted dying which is murder .
Disagree	Assisted dying can be open to abuse. We have hospice that can address the needs of those who have unresolved pain plus other support. There are numerous cases in other countries where the assisted dying law has been introduced and then abused by extending the remit further at the detriment of those who are more vulnerable in society.	Not Answered		This whole consultation survey is biased as the questions that are being asked are suggesting that the assisted dying bill has already been agreed upon. Therefore I have had to leave many questions unanswered as no alternatives are available. One comment is that you are also assuming that a person will have a survival period of so many days, how can anyone know this! Legalised assisted dying is non other than legalised suicide and in future the goal post could be changed depending on political will as in countries like Canada. Its the thin edge of the wedge.

Disagree	<p>Assisted dying can be open to abuse, and the Isle of Man Hospice also addresses four types of pain control within the Isle of Man.</p> <p>So with the hospice holistic approach no-one with a terminal illness needs to die with unresolved pain, and I feel this area of support is being met.</p> <p>A law that supports assisted Dying could lead to unnecessary suicides.</p>	Not Answered	<p>I found that I could not answer some of the questions within this survey, due to how they were written.</p> <p>The survey felt bias, and the questions were leading the answers into the responses needed to pass this proposed bill as a legalised bill.</p> <p>How do you answer the question, should there be a limit on life expectancy?</p> <p>I fear if such a bill on Assisted Dying should be passed, then this could easily become Assisted Suicides.</p> <p>I fear for the vulnerable Manx society, that could be easily coerced. I do think further discussions and other safeguards need to be considered.</p>
Disagree	<p>I believe even with the best intentions and careful guidelines, it can pose a danger to vulnerable people on our island. For example will we always correctly predict life expectancy? Would we be fully sensitive to an unhealthy internal pressure within an ill person to make this decision?</p>	Not Answered	
Disagree	<p>I believe that life from conception to natural death should be preserved and that euthanasia is intrinsically wrong</p>	Other	<p>I do not agree with the principle of assisted dying under any circumstances or in any location or for any group of individuals</p> <p>I disagree with the principle of assisted dying and believe it should remain illegal. Therefore I have not answered any of the questions on how the process would work.</p>
Disagree	<p>Every life is unique, however poorly.</p>	Other	<p>Assisted suicide is WRONG!</p> <p>Assisted dying is WRONG!</p>
Agree	<p>I fell that it is not right to let people suffer unnecessarily.</p>	Not Answered	

Disagree	<p>By legalising euthanasia and assisted suicide, we immediately forget the biblical truth that every human life has been made in the image of God (Genesis 1 v 26-27) and is therefore a valued life.</p> <p>A change in the law will inevitably place people with a terminal illness under pressure and fearful for people newly diagnosed. Evidence from other states where it has been introduced already indicates that fear of being a burden often becomes the reason for patients to end their life.</p> <p>Having worked in the NHS and volunteered in the palliative care sector I recognise that such care is expensive. However in a compassionate society we should be seeking to provide further investment for the palliative care sector. This would increase support for families and their loved one who has a terminal illness. It protects vulnerable patients from family members who may be directing them towards ending their life - such behaviour being difficult to always detect.</p> <p>Maintaining the current law to prevent euthanasia and assisted suicide is the only safeguard to prevent harm to the vulnerable in our society.</p> <p>Eligibility.</p> <p>Evidence from other states that have legalised euthanasia or assisted suicide indicates pressure increases to widen the categories of patients whose lives can be ended. This has included people with Alzheimer's disease, mental health problems and the elderly with multiple health problems.</p>	Not Answered		
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Disagree	<p>Assisted dying is unethical: all human life, wether healthy or terminally ill, holds value, to both the person as well as the community. Right to the last breath. For us, as humans, to interfere with that process is unethical.</p> <p>It would be distressing for the patient and family, that when a terminal illness is diagnosed, it is an option to die prematurely with the help of the doctors. With such a diagnosis comes confusion and a myriad of other mental issues; no person, whether deemed mentally well or not, should have the option to die early. That is a decision that will cause such pain, remorse and "what if he/she hadn't" in the future, to all their loved ones left behind.</p> <p>It's impossible for the patient, especially after a termal diagnosis, to not feel influenced in their decision by those around them.</p> <p>Once a law is changed it is easier to make amendmets to that law. It will be a slippery slope for the safeguarding criteria to be widened and open for intrerpretation. A lot of the guidelines are very subjective and cannot be guaranteed.</p>	Not Answered	<p>This questionnaire is extremely concerning to me. The questions are worded to easily lead a person to endorse assisted dying while they are strongly opposed to it. There is a strong feeling of coercion. This then makes me even more concerned and confirms that the process of assisted dying will be one of coercion and boundaries not be adhered to.</p> <p>Assisted dying is unethical. The entire community will be impacted negatively as members of the community are given the option to slip away. How sad. At most memorials the words "he fought to the very end" are heard. It shows courage and a love of life. Even for the uncourageous amongst us, those last breaths are often the times that a person's character is at it's strongest and they are able to leave their loved ones with closure. It comforts those left behind and gives a sense of the late person having done their very best, "they fought the good fight and never gave up". Assisted dying robs everyone of this gift.</p> <p>The terminally ill are the very people we should be fighting for, encouraging and spurring on, not giving up on.</p> <p>The disabled and mentally unwell will 100% be left vulnerable to the assisted dying law.</p> <p>The need for a psychiatrist is subjective to the opinion of the two doctors. I know many doctors who have made grievous mistakes, and to think they are the ones to judge whether a patient needs</p> <p>It's astonishing that you go beyond asking if this is acceptable to go down to the fine details of what it would look like. People wonder why society is falliing apart when you de value life like this and seek to end it. Shame on you!</p> <p>"we must all appear before the judgment seat of Christ" 2 Corinthians 5:10.</p> <p>"unless one is born again, he cannot see the kingdom of God." - Jesus said John 3:3</p>
Disagree	<p>- Making assisted suicide an option undermines good work in suicide prevention.</p> <p>- Some people who have terminal illnesses will feel pressure to end their lives. It turns into a duty to die.</p> <p>- Top doctors involved in caring for terminally ill patients and the elderly, on the mainland do not want assisted suicide legalised.</p> <p>- Access to proper, palliative care must be a priority</p> <p>- Disability rights groups in the UK (including Scope and Not Dead Yet) are against changing the law.</p> <p>- Coercion and abuse from family members could lead to more taking up the service for the wrong reasons.</p>	Not Answered	

Disagree	<p>I have concern when a euphemism, 'assisted dying' is used to conceal what is really assisted suicide - helping a person to take their own life. I also have a concern that terminally ill and/or frail elderly might be coerced into taking their own life because they are depressed, or because of pressure about future medical costs or by family pressure. I urge that much improved provision of palliative end of life care should trump any notion of assisting the ill and vulnerable to take their own lives. It seems unconscionable that a terminally ill person should be encouraged to think that they are not valued, rather than offering the highest quality of end of life care and support, both social and medical. I have a further concern, if assisted suicide becomes law, that medical staff who wish to support life and have an aversion to helping a suicide may, on threat of sacking or the like, be coerced as to their involvement. I fear that doctors or nurses who value the sanctity of life will be sidelined for promotion, or sacked, or forced to pass to a pro-assisted dying colleague any patient request for assisted suicide. In all of this debate no concern seems to be given to life after death, nor to the Christian belief that beyond death all will appear before God for judgment.</p>	For over 5 years	<p>I plead that there be no 'assisted dying' draft bill or law - the only dignity is human life. Enabling a person to take their own life, for whatever reason, denies dignity, indeed, confirms that they are of no value and so might as well end it. As a moral, caring and compassionate society, we ought rather to be protecting the ill and vulnerable and providing the highest quality of end of life palliative care, both medical and social, such that the dying are supported until they pass into eternity. Here is a pointed quotation from the Bible book of Hebrews - Heb 9:27-28</p> <p>'27 Just as people are destined to die once, and after that to face judgment, 28 so Christ was sacrificed once to take away the sins of many; and he will appear a second time, not to bear sin, but to bring salvation to those who are waiting for him.'</p>
Agree		Not Answered	<p>I feel strongly that people should be able to give directions in a living will to cover cases of dementia or other medical conditions where the person might lose their mental capacity to choose but who have made it clear that quality of life and mental capacity are essential elements of living for them. Many people including myself feel that they do not want to live when all that gives them any quality of life has gone. They should not be left with the terrible dilemma of knowing they will live with this terrible quality of life with upset to themselves and family members for perhaps an extended period of time or that they choose a time to essentially commit suicide at an earlier time than they might actually wish to die because they don't want to go past the point when this may not be an option as their memory and competency fails. I feel it is cruel and unnecessary.</p>
Disagree	<p>There is already provision for support within hospice's remit which includes pain relief etc for the terminally ill and this should be supported by Manx Care.</p> <p>There shouldn't be a need for this bill to be even considered it is opening a can of worms.</p>	Not Answered	<p>This consultation survey is biased towards this bill having being agreed upon and these questions are written towards that end. I therefor can't answer as I don't agree with the concept.</p> <p>One question no 21. How can anyone determine how long a person will survive for and then make a final judgement based on supposition.</p> <p>Legalised assisted dying is nothing more than assisted suicide and, very importantly no matter how good you think you have regulated this in future the goal posts could be change as in Canada depending on the political will of future governments.</p> <p>This is the thin edge of the wedge.</p>

Disagree	As a committed Christian I believe in the value of every single life. To say that the lives of some people are worth less, because they can't do anything, are struggling, are in pain, or whatever is to devalue them. Those who are terminally ill, or old, could easily feel under pressure to agree to end their lives because they may feel a burden to others, or cost a lot to the state. In my view it is far better to improve our already excellent palliative care, and put more funding into that. However many safeguards are put in place it would be very easy for them to be weakened at a future date	Not Answered	
Agree	I have been a supporter of Dignity in Dying for many years and believe a terminally ill person should have the right to decide if they want to live or die on their terms.	For over 5 years	
	Of course checks and balances should be in place in case they are not mentally competent		
Agree	People should not be forced to suffer while already diagnosed with a terminal illness.	For over 5 years	
Disagree	It is difficult to respond without being aware of the proposed bill, which is being presented, almost marketed, as "something wonderful we need to do and do so right now, wouldn't you agree?" There is an absence of balance, something essential to healthy debate. I hope the Tynwald debate will find a way to do this and to overcome the obstables of presentation.	For over 1 year	See my extended comment in the question above.
	I am against this on personal, moral, and religious grounds. I am also very rarely an absolutist. Could you present me with a case where assisted suicide (yes, terminology matters) might be preferable to enduring another period of time in excrutiating pain with no hope of remission? Quite probably. But to even consider supporting such a bill I would need to see much tighter safeguards in place before such a request could be acted upon. Only two doctors, only two people, when death is the outcome? And why only doctors? This isn't only a medical decision. It's life, spiritual, relational, mental, a whole host of facets coming into play at a moment of extreme turmoil.		Also, I am answering some of the questions on this page as if the option was in place, but this is such a minefield.
	To declare a bias, I am the guardian of an adult with Down's (well, really, he's my guardian!) and I am well aware that in another circumstance he could've been aborted because of his condition and the inability or unwillingness of his parents to cope with it. Anyone who knows him would know that would have been an absolute crime, such is his joy in living and the smiles he brings to others. While these are different debates, they are not completely isolated. Had he been aborted, many people would've said that was perfectly understandable and there would've been no stigma attached. But to ask a question for which there is no easy answer: is personal choice always the right choice? Obviously not...but where are the		I will say that the possibility of being able to self-collect from a pharmacy is incredibly dangerous. Once they are in the public sphere, who will wind up in possession of them? Who will accidentally take them? What child will grab them? With the best will in the world, things will happen.
Disagree	Every life is valuable. Terminally ill people already struggle with feeling useless and faculties disappearing.	Not Answered	

Disagree	<p>As a practicing veterinarian of 35 years experience, I have put thousands of animals to sleep, alleviating suffering and hardship in most of them. I have also seen the intense trauma experienced by owners of these animals, often for years afterwards. Most owners desperately try to get the vet to recommend euthanasia so that they do not feel responsible for the decision. The guilt and trauma can be profound.</p> <p>I have also experienced countless cases in which the patient was put to sleep because it had become an inconvenience. People going on holiday, those getting a new puppy or kitten, many who have found the smell or sight of their previously beloved animal unpleasant or have been unable to cope with incontinence in their pet, take the obvious way out.</p> <p>There are also a smaller number of owners who do not even have one of these tenuous reasons for taking the patient's life. They are just tired of the pet, do not feel it is worth spending money on, or even in the worst cases, to spite their family members who have hurt them. A law has had to be passed whereby the correct owner of a pet must be identified by means of its microchip before it is put to sleep.</p> <p>I have sadly had a number of healthy, happy pets that have had their life ended purely on a whim of the owner. Many other vets would object, but from experience, it is preferable to comply the humane way, providing everything within my power has been done to offer an alternative option, than to have the owner end the life of the animal in a different way, possibly causing extreme pain or suffering.</p> <p>Research has shown that as many as 70 percent of elderly or disabled people feel they are a nuisance to their family and that their loved ones would be better off if they were not around. All these people are at risk of opting for euthanasia, not because they want to end their life, but because</p>	Not Answered		
Disagree	<p>If the person is considered a burden to the family, family members may coerce the person into accepting assisted dying.</p> <p>The person may opt for assisted dying if they think they are a burden to the family.</p> <p>If this legislation is adopted in the Isle of Man other organisations in favour of assisted dying in other areas of the U.K.</p>	Other	Indefinitely	
Agree	<p>I simply believe the choice should be there.</p> <p>What convinced me beyond doubt was to witness a friend's decline with a terminal illness similar to Motor Neurone Disease. He was in his early forties and did not want to reach the horrible natural end-point of this disease, but had no option.</p>	Not Answered		
Agree	<p>When and where and with whom we choose to die, if we are terminally ill or living with a disease that causes chronic pain, should be an individual's choice. Such a decision should be considered a fundamental human right. As a society we talk a lot about 'independence', 'quality of life' and 'a right to choose' but currently medically assisted dying within a legal framework remains a criminal act in the UK and the IOM.</p>	For over 1 year		No other comments.

Disagree	I think that legalising assisted dying or suicide can easily be subject to abuse. I have seen statistics that mention that 54% of those who have opted for this have cited finance as a reason. I think our greedy and selfish nation will put pressure on elderly or sick relatives where they would not have opted for this themselves. People will not want to be a burden, but opt for this rather than put relatives out. I am a strong believer in our palliative care system and in hospice where many of my friends have died excellently, with their family around and in no pain.	Other	Permanent working, or retired residents for 10+ years, though I oppose the bill	<p>I am horrified at this consultation... it is totally skewed to assume we are going ahead with it and all agree. I am 100% opposed to the bill in any format at all. This is biased and unprofessional.</p> <p>Assuming we agree with the bill is why I have skipped many questions, I don't believe anyone should have life ending drugs in their house, so there should be no need to return them. I also hope we will never need a report to tell us how many people have availed themselves of this option.</p> <p>I think we already provide for the dying well on the Island with an excellent Hospice and Hospice at home, where many of my friends have died naturally, peacefully and pain free, surrounded by their relatives.</p> <p>The emotional pressure on sick and elderly folk is my main reason for opposing the bill, but that goes on to the slippery slide we see in Canada, where it is even being offered to homeless people as a cheaper option... what has our society become that we say we can't care well for the poor, lonely, disabled, sick and elderly, we will just dispose of them?</p> <p>Going any further with this bill is an anathema to me, please allow our Island to be famous for excellent care, as well as the beauty we see all around us, rather than a place to take your life prematurely.</p>
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	<p>Disagree (Although I don't live on the island, but in England, I believe that the outcome of the consultations in each part of the British Isles will impact on what happens in all parts.) I believe that introducing assisted suicide cannot avoid impacting negatively on the most vulnerable. My husband suffers from chronic physical and mental illness. He has said that the availability of assisted suicide would only serve to further deepen the lack of self-worth of many disabled people. What is needed is really good support for all for living, and excellent standards of palliative care for all who are dying. My mother, grandmother-in-law and mother-in-law all benefitted from such care, both in care homes and in hospital. I have, sadly, known of others who have not been provided with such care. No one should die in distress because the best of care is not available. Sadly, well-intentioned though the moves towards the legalisation of assisted suicide are, they bring with them the pressures of economics: is it cheaper to support a chronically disabled or sick person to live well or to be helped to die? No one should die because it's cheaper for them to do so. Also, sadly, the legalisation of assisted suicide brings a new psychological pressure: 'what should I, an elderly person, dependent on others for care, and feeling that I am a burden on those I love, do?' No one should die because they feel they are a burden. There is much talk of safeguards but it seems clear that in countries where assisted suicide, so-called 'assisted dying', has been legalised the trend has been towards extending the original scope of the legislation, and economic and social pressures are, too often (and once is too often) winning out over safeguarding.</p>	<p>Not Answered</p>	<p>I am disturbed by many of what are clearly seen by those proposing the bill as 'safeguards'. I have not answered a number of the questions because they presuppose a support for the underlying principle. But notwithstanding that fact, it is clear that the role of health professionals in the process is key, and that that in turn is going to impact on every doctor and nurse, and those in training, or considering a career in healthcare. It faces them with choices. What will be the outcome for health care? The very fact of the level of detail of 'safeguards' proposed should raise alarm bells. This is an area where 'getting it wrong' is a very, very serious matter.</p>
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Disagree	<p>I do not think that anyone, anywhere should have assistance to kill themselves, therefore it should not be allowed in any form on the Isle of Man.</p> <p>Every person is a valuable member of human society and is worthy of being enabled to live until the day of their natural death. Killing someone or helping them to kill themselves is just plain unethical and completely contrary to laws which are there to protect life and contrary to a basic human principal of care for one another.</p> <p>I am aware that the idea of assisted dying is regarded as a compassionate action to relieve suffering. However, palliative care is so advanced these days that there are very few people whose lives cannot be bettered with this care so there is no need for people to be helped to kill themselves.</p> <p>Given that as a society we are aiming to encourage people's well-being and reduce the number of people trying to commit suicide it is bizarre and grotesque that assisted suicide should even be considered as a possibility. I am also aware that once the concept of assisted suicide is accepted as legally permissible for even one person, then the floodgate is opened. This is borne out by events in Canada where initially medically assisted dying was to be for a few terminally ill patients who chose it but has been extended to those who are chronically ill and would have been extended to those with mental illness except that there have been complaints about that so it has been put on hold. In The Netherlands a medical practitioner can make the decision euthanise a disabled child without consulting anyone else and without parental permission. Is that really the end point that the Isle of Man wants?</p> <p>I have worked as a nurse and have seen terminally ill patients dying being tended to and kept pain-free and cared for until they died in a caring</p>	Not Answered	Where is the information about alternatives to the proposals eg palliative care? Only one side of the argument seems to be being considered.
Disagree	<p>I beleive that this is simply unethical as this forces doctors to comply with legislation that may not reflect their personal beleifs. It would also be easily extendable into other vulnerable cataegories such as those who are chronically ill or disabled which puts a priority on who is allowed to live.</p> <p>Who are we to have the rights to decide on another's right to live just because some is not 'healthy' or dependant on others to live? It would be much more ethical to our money and doctors time into palliative care to support better those who are terminally ill.</p>	Not Answered	<p>If this does go ahead it's important to consider what safeguards there would be for medical professionals to follow through with actions appropriate their personal beleifs about euthanasia, for what extensions are unethical and what terminal illnesses are included in this. Demetia is technically classed as a terminal illness. Hearing about the dutch woman with dementia being held down as doctors administered a deadly dose, the doctor being acquitted of any wrongdoing makes me sick. My Nan had dementia and the thought that someone could have used her terminal illness to justify killing her off without her permission while she was in such a state, is disgusting.</p> <p>I have a number of friends with terminal illnesses and chronic illnesses. And again the thought that these positive individuals who love life even though they struggle with these illnesses, could be persuaded/ forced into ending their life quicker than their illnesses take them is appalling. It's important to care for those who are termially ill, and they often don't have enough care to help. Prioritse care for these patients and the relevant drugs to ease symptons and pain, over drugs and medical professionals time used to end life.</p> <p>Preserve and care for life.</p>

Agree	<p>People should have the freedom to choose for themselves. It's paternalistic for other people to attempt to choose for them, on the basis (presumably) that they are not capable of making their own informed choice.</p> <p>There was an article in Isle of Man today on 11 January headed "Fifty medics get together to say: 'We don't want euthanasia'"</p> <p>https://www.iomtoday.co.im/news/fifty-medics-get-together-to-say-we-dont-want-euthanasia-587309</p> <p>This may give the impression that most, or all, or the island's doctors are opposed to it. I'm a GP on the island, and I'm in favour of it. However, this is my personal view, about what I would want for myself, and I have asked for my comments to be published anonymously because I don't want my patients getting hold of the wrong end of the stick and thinking I'm "Dr Death".</p>	For over 1 year	
Disagree		Not Answered	
Disagree	All life is precious and man has no right to take life, God gives life and takes life	Not Answered	Do not agree with bill at all and it should not be passed , it is not right for any human being to take a life
Disagree		Not Answered	The questions seem to be all about the processes involved in assisted dying, rather than the moral, ethical and religious issues.
Agree	Reduce unnecessary suffering	Not Answered	I strongly support Assisted Dying, a person should have the right to choose to die if their medical condition is terminal, slow and painful.
Disagree	I disagree because it is impossible for a doctor to know for certain if someone is going to die within the next 6 months because anyone can live longer or shorter than expected. In addition the hospice is able to do end of life care without the patient being in any pain what so ever. This is assisted suicide as people are just dying without loving out there last days.	Other	I don't believe that anyone should be able to partake in assisted suicide
			This is a terrible consultation because it is very biased on the fact that you want the assisted suicide bill to proceed when in fact I massively object due to the fact that life is not in the hands of the doctors but only time will take someone. Also in Canada the bill starts just like this but rapidly widened to impact people with mental health and disabilities. This is terrible and will cause people to believe that they are a burden to their family and use this bill to help the family where in fact this is not the case. My granny had terminal cancer and was given 6 months to live but in fact lived on for another 4 years and was able to make memories with family members. To conclude this bill should be unable to pass due to all of the flaws.
Agree	Preserve dignity, choice and control	Not Answered	I'm not sure if people should travel here specifically to die.

Disagree	<p>I am very concerned that by agreeing with assisted dying we are setting a precedent for further developments where we choose who lives and who is put to death. Mental health is a growing problem within our community and to legalise the option to opt for premature death will be seen by some as an easy way out. The elderly and those needing a lot of support to live from day to day, at significant financial and emotional cost to family, will see themselves as a burden to family and society. It seems that the island struggles to attract sufficient staff to the Health Service already without there being another reason for potential recruits to avoid the Isle of Man. My daughter is a nurse and would have reservations about returning to her homeland, where her role or those of her colleagues may be to take life, rather than try to preserve life.</p>	For over 5 years	<p>I have rarely felt SO strongly against a proposed Bill being introduced in the homeland that I have been so proud of throughout my life. I am particularly concerned by the format of the questionnaire, which is why I have left some questions unanswered. To answer some of the questions there is an assumption that these are the only possible options. The island is justifiably proud of the care it currently provides through Hospice, where friends and family have been offered the dignity to die naturally in a peaceful and pain free environment, surrounded by their loved ones. I sincerely hope and pray that the Bill is withdrawn before it attracts negative press and publicity for all the wrong reasons. It has been said by some that no publicity is bad publicity....on this occasion I beg to differ.</p>
Disagree	<p>Every life is very precious whether young, old , disabled, diseased, dementia. or terminally ill.</p> <p>Each person is given breath & life by God for a purpose which so often cannot be understood discerned or valued by human limitations.</p> <p>The great dangers of taking the supreme position from God himself of whether a person should be assisted to end life especially people who are vulnerable to suggestion from medical professionals or others would be a step down the slippery slope of valuing the sanctity of life itself.</p>	Not Answered	<p>A terrible backwarf step away from the true nature of loving care.</p>
Disagree	<p>God created all humans and it is not for us to decide who lives and who dies and when.</p>	Not Answered	<p>This is all so wrong. Assisted dying is wrong and should never take place.</p>
Agree	<p>Someone who is terminally ill should not have to suffer unnecessarily</p>	Not Answered	
Agree	<p>It is a 'Human's Right' to decide if they wish to die without either them suffering or their family.</p> <p>Generally 3 forms of death: Heart Attack: almost instant for person & major shock to family. Cancer: A slow suffering death for person, gives family advanced notice. Dementia: The person doesn't know they're dying, but are dead to the family who can't grieve as the physical being exists.</p> <p>A 'sound state of mind person' SHOULD be able to choose, that if their life will reach a point of suffering they can have it ended "humanely".</p> <p>This proposal is currently for Cancer patients but should be available for those who have been diagnosed with Dementia. On being informed of diagnosis, patients (as you do with a Will) should have the right to decide when they are compos mentis what should happen when they are not</p>	Other	<p>Non-Residents should be allowed it BUT for a fixed fee & Manx Doctors sign off</p> <p>I agree (as stated previously) a person should be able to make a decision on diagnosis if they would want assisted dying. In the case of cancer the choice of when to die can be quite late in treatment (probably when their pain becomes too much) & they shouldn't need 14 days gap before it's sadly accepted they need to end their suffering. 2-3 days max & this is mainly to enable "chosen Manx Location" to be sorted (so area closed off if outside from "passerby or unintended spectators).</p> <p>An independent witness (probably doctor/policeman) should be present at the time of administration of the drugs. The drugs shouldn't be with patient at anytime prior to action.</p> <p>Government doesn't need a report on who chose or didn't choose to end their suffering. Let those who chose to, have their death recorded with dignity!</p>
Agree	<p>I am of the opinion that for someone who is terminally ill, they should the choice to explore alternative treatments, or if there are none, whether they want to continue with ongoing treatment to prolong their life or not.</p>	For over 1 year	

Agree	People should have the opportunity to have control of their mortality if faced with a terminal diagnosis.	Not Answered	It appears to have been thoroughly thought through and seems a workable, concise process.
Agree	If I am in pain, I feel I should be able decide when and how I die, I should have a option that is reliable and pain free.	Not Answered	
Agree	In line with other recognised jurisdictions	For over 5 years	
Disagree	Dangerous & unnecessary. Concerned that there are examples in other administrations eg Canada that the terminally ill adults would just be a start. Furthermore unnecessary as it is already possible for the terminally ill to ask for life support to be withdrawn so they can die naturally rather than taking a number of tablets.	Not Answered	Being 77 years of age myself I am acutely aware that people like myself may be pressured into requesting assited suicide so as not to be a burden on family and society.
Disagree	No one really knows when the date and time will be when a terminally ill person will die. My husband was terminally ill with Cancer but in no way did he want to be killed off or take poison to kill himself. He was so well cared for by the NHS, he loved me and his children and wanted to spend the rest of his reaining life with us albeit for a short time. If people are loved and cared for they do not want to die. Palliative care in the UK is the best in the world and no one needs to die in pain. To ask a doctor to help kill a patient is murder and however you dress it up calling it 'assisted suicide' and you are asking doctors to go against their consciences. Doctors are trained to save lives not to kill them deliberately. Even if someone is near death doctors should let nature run its' natural course and if someone is near death there is no point in stuffing them with poison. Dying by assisted suicide whereby the patient takes the poison his/her self is a painful death and not compassionate or dignified. Once assisted suicide or euthanasia ,which it is, becomes law, it gets out of hand as it has done in Holland ,Belgium and Canada and people get euthanased for all sorts of trivial reasons. It would become like abortion has become wherby the law in UK was passed for a few hard cases but very soon the numbers escalated and now abortion is practically on demand for trivial reasons too. 10 million unborn babies have been killed by abortion since the passing of the 1967 abotion law. Never mind saving the planet, soon there will be nobody to put on it.	Not Answered	
			It is very dangerous to put vulnerable people at risk of coercion.

Disagree	<p>This is a very dangerous situation for those vulnerable people, both present and future, who could be faced with the dreadful decision over 'should I live or should I just give up my life as I am a burden to those around me'. It is also dangerous for the whole of the UK because any small or seemingly innocuous relaxation to allow certain people to voluntarily take their own life under controlled conditions will lead to a wholesale flood of cases where suicide will become the norm. An example of this 'creep' is the abortion law that was brought in in the 1960s (?) to allow babies to be aborted in extreme, justifiable situations and is now readily available at home without any medical supervision.</p> <p>Whatever other views there may be, it is certain that God is the giver of all life and only He must be given the freedom to decide when that life ends. No individual has the right to terminate life and only doctors have the right to decide if very frail life is viable without artificial aids.</p>		Other	Assisted dying should not be permitted at all.	No. The Bill should simply not be passed for the stated reasons.
Agree	It's up to an individual to make their own decisions! A guaranteed pain free method should be available.	For over 5 years			
Agree	Freedom of choice not to suffer unnecessarily	Not Answered			Being kept alive with no hope of recovery is not something I would like to happen to me or my loved ones.
Agree	When there is no possibility of recovery, and life gets to the stage of being unbearable for the individual, they should have the right to end their own lives with appropriate doses of safe medically prescribed and dispensed drugs.	Not Answered			<p>Re Q 11 If the person is incapable of taking oral meds, but meets all other criteria for assisted dying then the dose could be administered intravenously. In most circumstances the syringe pump containing the lethal dose could be initiated by the individual themselves, and only in exceptional circumstances would a medical professional be necessary to administer the dose after the pump had been set up.</p> <p>Q13/14. People taking up the right to assisted dying need not necessarily be permanent residents.but would still have to fulfil all the criteria.</p> <p>Assisted suicide, as per the Dignitas situation in Switzerland is I understand not under debate, therefore an influx of 'suicide tourists is vastly unlikely</p> <p>Q 20/21 A 'cooling off /reflection' period is reasonable but may be shortened after consideration of the individuals suffering, mental and physical.</p> <p>Q22. If patient is at home, then patient or designated relative should be able to get the medicines, however the security of having intentionally lethal doses of drugs in a home situation is more open to abuse / lax security and would be difficult to 'police'</p> <p>Q25, Medical professional should be immediately available (? In the same building) but not necessarily present if the family /dying individual want privacy for these final moments</p>

Disagree	Life is a very precious thing and should not be given up. Terminal illness is not always accurate. Also terms can be mis-applied and stretched to fit whatever is wanted. I do not trust that firstly any allowance will be applied strictly as intended or that it will not be an opening to allow for further relaxation (like many other laws introduced to the Island or like make other countries around the world (Canada and Netherlands as examples)).	Not Answered	This consultation form is biased. If like me you answer no to question 8 why are there a further 20 or so questions that I cannot answer? This feels like a trick so the data can be manipulated.
Disagree	The Canadian experience of uncontrollable extension to legislation to include non terminal illnesses and mental illnesses. The impossibility of safeguarding vulnerable patients from coercion of all types, including, not being a burden, often given as a reason . The practice is unethical, places huge burden on medical professionals. There is evidence that requests for assisted suicides decline if adequate provision of palliative care and good low cost housing is available for patients	Not Answered	Refer to answer to question 8. Palliative care and proper social provision would seem to address many of the reasons given for requesting assisted suicide in jurisdictions where the provision is available. Unbearable suffering is not given as a reason as often as might be supposed. There seems to be evidence that assisted suicide does not always result in a quick and painless death particularly where the lethal drugs are administered orally. This aspect of the process never seems to be discussed .
Agree	It is cruel to make people hang on when they are dying anyway	Not Answered	This is the kindest gift to give a dying person and their families. But it shouldn't be seen or treated as an easy option and every safeguard possible should be put in place. A comfortable death when the time is right is what we all want isn't it?
Disagree	The information from the Dignity in Dying Surveys are biased by question phraseology as they have their own agenda. Top quality palliative care, accessible to all for any terminal condition, allows people "to live before they die" (Dame Cicely Saunders) which would then need to be strongly promoted through advertising to remove misinformation & stigma, which is underlying the fear many have. As a GP I was aware of the fear associated with terminal illness and of how that can be addressed by good palliative care teams; they are trained to explore what underlies requests not just take requests at face value. As a GP with interest in mental ill health I found a lot of people felt that at some point in their lives that "life was not worth living" but when asked deeper questions (e.g. did you want to do anything about it) many had no wish to die. Passing a law to allow assisted dying in certain groups and with safeguards has quickly been immediately challenged legally in other jurisdictions widening the access to many groups - MHKs should be encouraged to check out what has happened following legalisation of MAiD in Canada. In addition passing this law for the Isle of Man would be highly likely to result in the same law being passed across the UK as legal challenges would highlight "discrimination".	Other	<p>If a law is passed it will be challenged legally thus removing the residency status. Therefore the issue will be irrelevant.</p> <p>In addition to my comments under question 8: Regarding safeguards - they will not be sound enough: (a) I have seen many relatives refer to their relative as "suffering" when they have dementia when the person is actually quite content - it is the relative who is suffering. (b) Regarding administration - patients always chose the easiest option with least burden on their own efforts for any medical condition (e.g. couldn't I just have a pill to help me lose weight - or an operation - so I can keep eating my current diet) so the lose terminology is very dangerous (Canada has seen that already). Having lethal medication being prescribed and stored "just in case" is dangerous as open to misuse. (c) The residency issue will be challenged legally meaning tourists will be allowed to access Assisted Dying if you pass the law and the rest of the UK does not do so just yet. (d) Knowledge of patient by the doctor: even as a GP with good continuity of care I did not know the family circumstances for most patients (and sectioning severely mentally ill patients under the Mental health Act quickly highlighted that even my partners in the practice didn't know what I knew as one cannot put all the small details of information in the patient's records); now with many patients seeing a variety of doctors/locums it is even less likely that someone will really know the family situation (pressures etc). (e) Doctors in Palliative Care are nearly all against such changes in law but would be forced to comply or resign as in other jurisdictions legally they cannot opt out. (f) When the UK Abortion Act was passed patients were referred to</p>

Disagree	I believe in the sanctity of life and that we should ensure excellent palliative car for anyone who is terminally ill, but we should not be cultivating a culture that encourages suicide and so devalues life. I believe we would enter an extremely dangerous, downward, unethical slippery slope that would put pressure on people to end their lives if we allow assisted dying for anyone. This has already been demonstrated in other countries who have taken this step and seen massive increases in such suicides within a short space of time after legislation opened the door to "assisted suicide". Please do not open this Pandora's box to allow this into the UK.	Other	You have not given us the option in most of the boxes above to state that we oppose assisted dying every instance. It is impossible to answer your yes/no/unsure questions if, as is the case in my responses, I am completely opposed to "assisted suicide"	I have explained above, this form is badly designed in my opinion, as it continually asks questions assuming the person completing the form agrees with assisted suicide.
Disagree	Permitting assisted dying will lead inevitably to encouraging assisted dying. Terminally patients should be given all the tender palliative care possible. They could feel under pressure to end their lives in order not to be a burden and could be pressurized by unscrupulous relatives. It also puts a burden on medical staff to encourage this which is an unfair burden on them.	Not Answered		It is a terrible bill turning doctors into administrators of death. We lost a beloved daughter to cancer some years ago so understand the pressure that she could have been under if offered assisted dying when undergoing treatment that made her so ill.
Disagree		Not Answered		
Disagree	In 45 years as a doctor the outcome I perhaps dreaded most of all, was that of one of my patients taking their own life - to understand this as a lay person, one only has to think of a friend or family member who has done or attempted this, to experience the shock and heartache it inevitably brings. To facilitate this at the most vulnerable time of a person's life seems deeply flawed and inhuman. A 'right to die', so easily becomes a 'duty to die', as we are seeing in countries like Canada that have taken this route, and there is already a better way with provision of outstanding palliative care, removing the need for a patient to be killed or enabled to commit suicide, even though the 'briefing paper' for this consultation wrongly asserts otherwise. I have looked after many dying patients, including in palliative care beds in our cottage hospital, and have myself helped provide symptom relief and a dignified environment for them to die which does not include killing them. The pressure for assisted suicide and euthanasia comes from a very small group of middle class intellectuals, for whom autonomy is the issue, rather than the relief of suffering. Their real issue is 'who has a right to stop me committing suicide?', rather than 'what can-I do to improve this person and their family's experience of dying?' even if it impacts badly on other people, including other dying patients who then feel 'obliged' to take this route too.	Not Answered		This is not by any stretch of the imagination a 'consultation'! The briefing paper is not a balanced document presenting the arguments for both sides of the argument, as one would expect from a democratic parliament, and includes much that is inaccurate and effectively just a 'promotion' of the proposed bill. The consultation has been worded in such a way that most of the questions can only be answered if one has answered 'agreed' to Qu 8. - so the statistics for most of the rest of the questions will be meaningless, as those who are opposed to the bill will have been unable to answer these questions. I am deeply proud of Tynwald as a part of my Manx heritage, but feel that this process lets the Manx people down, as also will be the case if this bill is passed. This is especially so, as I can see that you are just being used by the pro-euthanasia lobby, as also Jersey, to pressure Westminster to introduce euthanasia across the UK - the real objective of those promoting this bill.

Disagree	Once the is law changed it is uncontrollable such as the ongoing extension of Canada’s euthanasia law, from terminally ill, to chronically ill and disabled, to mentally ill. I believe in Canada, hospices are now having their funding taken away if they do not agree to assisted dying. Our own hospice has already said they would not be interested in assisted dying. I also feel it is unethical as doctors and nurses are trained to help make people better and if this can't be I don't think someone should have the right to kill themselves.	Not Answered	The only reason I ticked yes in 13 is because we do not want or encourage "assisted dying tourism"	Thinking of someone who has dementia and lying in a care home where their family are seeing their inheritance slip away in care home fees, I just think that if the law changes there can be coercion by the family for the family member to think they are no longer valued and would be better off dead. Where there is breath there is God given life.
Agree	Dad died of brain cancer, what he went through nobody should ever have to endure. He would have taken care of his own mortality months earlier given the choice.	For over 5 years		To think that nurses undergoing training in Holland no longer are trained in palliative care but only in assisted dying - how sad, I hope that never is the case on the Isle of Man. Get it done.
Agree		Other	Shouldn't need to be a resident - maybe present on the island for at least 2 weeks to undergo assessments by health professionsal	I think it should be consistered that a designated pharmacist or specialist palliative/trained/assisted dying HCA delivers the medication to the individual and witnesses them taking the medication and offers counselling to the individual/their family prior to taking the medication. Also I think it should be considered that this service is offered to individuals from the UK with terminal illnesses.
Disagree	In my opinion, a sincere and true compassion for those who are terminally ill means ensuring the availability of high quality palliative care to deliver timely and appropriate support during an individuals most vulnerable time. However, legalising euthanasia and assisted suicide will rob this vulnerable group of dignity in the guise of promoting autonomy.	Other	Not applicable	I do not think this form is well structured as some of the response options given are ambiguous.

Disagree	<p>I object strongly to assisted dying, euthanasia, in any form for human beings.</p> <p>There are many reasons why but I will highlight just three below.</p> <p>In all of the countries which have adopted euthanasia into their laws there has been a relaxing of the rules and a slide towards euthanasia happening for less and less reason. Canada introduced it in 2016 and already the law has changed to include mental illness and the proviso of 'death being reasonably foreseeable' has been scrapped. There are now some who want this legislation to include babies up to one, who are disabled.</p> <p>Because of housing shortages and younger people struggling with finances this puts awful pressure on older people who aware of these things to want not to become financial and physical burdens. Thus the right to die soon becomes a Duty to die. Which 80+ person would be denied this right, given that they have health problems synonymous with this age, even if their motive is really 'not wanting to be a burden'. Of course this is assuming that younger people involved are honest and upright. What about if they are bullying, pressuring and suggesting to the old person that they make easy for the next generation?</p> <p>So open to abuse in so many way.</p> <p>It is simply not possible to check and know, beyond reasonable doubt, that a person is not being coerced or feeling self pressure to request euthanasia. The only way to protect people is to not have euthanasia as an option. We all have times of darkness when the question, is it all worth it, arises. Once</p>	Not Answered		
Disagree	<p>I believe that human life is sacred and that human beings do not have the right or duty to interfere with the length the life of another. From time immemorial Human beings have had to live with the effects of disease which has caused an enormous amount of suffering. Medical science still does not have the knowledge to know when a person has finally gone beyond the hope of recovery. Old age and terminally ill adults are a problem and even an inconvenience, to the society of today. My belief is that old and terminally ill people should be treated with dignity and given all the help they need until their last moment. Assisted dying is the thin and of the wedge, as has been seen with abortion. A person slightly deformed has no right to life? So it will be with assisted suicide. 'I'm sure he would not want to live?' That is the cry of the healthy person who supports this action. Live and let live, not live until someone else thinks it time for you to died.</p>	Not Answered		No, I completely disagree with it.
Agree	<p>I was a carer for years ,and when you have someone, in agony for months on morphine still crying saying shoot me please, and all you can do is comfort them and get the help they need ,when they have had a good life but now in bed I'm agony on the most pain relief it's heartbreaking, it will haunt me forever that I had to say sorry I cannot ,so I definitely agree ❤️🙏</p> <p>good luck all</p>	Not Answered		

	Disagree	It's a dumb idea.		Not Answered		This questionnaire is clearly written from a perspective of agreeing with assisted dying. I do not support assisted dying under any circumstances and find the questions asking for the methods of administration and how this should be implemented misleading.
	Agree			For over 1 year		
	Disagree	Impossible to legislate safeguards that can be amended in the future as Canada is doing now.		Not Answered		
	Agree	Everyone should be afforded the right to choose when they die. I am amongst many that are watching loved ones become a shell of who they used to be. Whilst this new law if passed will not help them, after much consideration I'm firmly of the opinion that people should be afforded the right to end their life on their own terms when terminally ill.		For over 5 years		
	Disagree	Let's put our resources and energy into supporting people from birth to death rather than allowing anyone to lose sight of the preciousness of life and seek to die prematurely. Greater support for families, care organisations and churches on the Isle of Man should be the government's focus, not assisted suicide.		For over 5 years		
	Disagree	It suggests people are not precious or valuable. It undermines the wonderful work of the hospice organisations. It is hurtful and damaging to the elderly, infirm or disabled, suggesting they have no value, are not worth saving and do not deserve to live. It puts pressure on vulnerable people, who may have mental health issues, insinuating that this is the 'best' option. Best for who?? It is NOT assisted dying - it is enabling suicide! Massive amounts of time, effort and money are being spent on trying to prevent suicide, and this runs completely counter to all that effort, suggesting that suicide is a good option. Research has shown that PEOPLE CHANGE THEIR MINDS. If they have been killed by society, there is no reprieve or chance to change.		Not Answered		Doctors must not be forced into participating in euthanasia. "First do no harm." It is not assisted dying it is eugenics. Please review what is happening in other countries that have gone down this route: Once medical killing is legalised, many more reasons to kill become allowable. Belgium is continually extending the scope of medical killing: people with psychiatric disorders, mental health issues, and even without explicit reasons have been medically killed. In Canada people are being killed not just due to their disability, but because they are poor and can't afford care. Hospitals/medical services which opt out are financially penalised - e.g. hospice in British Columbia which was refused funding because it would not accept medical killing. Allowing euthanasia leads further and further down a path of broadening the scope, and suggesting that society does not want to look after or care for the most vulnerable people. Please do not do this.
	Disagree	The Proposed Bill is inadequate with regard to safeguarding. In other countries where Assisted Dying is legal, the initial safeguards have been eroded over time. This is very concerning. If this were to become law on the IOM there is a possibility that citizens of other jurisdictions would travel here to make use of it, increasing pressure on our health services. Great Britain is a global leader in Palliative Care and we have excellent services here. Resources would be better spent in increasing access for all.		Not Answered		It would be beneficial to have opportunities to discuss the issues around Assisted Dying with people who have differing views. It would also be helpful to know more about what happens in other countries who have Assisted Dying enshrined in their legislation.

Disagree	<p>This is a dangerous step to take, devaluing human life, putting the vulnerable and disabled at risk, putting pressure on those who feel they are a burden. It will be detrimental to the support received for our wonderful hospice and could prevent research being done that would improve end of life care, for the many who wish to their life to the end. It is a step on a slippery slope.</p> <p>Although we are told that health care professionals will have the right to conscientiously object; this right will be diluted over time as organisations (eg pharmacy chains) will not employ those who refuse to take part.</p>	Not Answered	<p>I have not answered Questions 9-27 on this consultation as each of them has assumed that I have answered agree to question 8. This consultation is very slanted in favour of assisted dying.</p>
Disagree	<p>It is not for authorities to allow a decision to be made for life or death, it is unethical and bararic. We have no moral right to decide on the death of anyone, including ourselves.</p> <p>Reading through the questions below, it assumes this bill is already passed and this is just an exercise on filling in the details and fine tuning the policy before being passed into law.</p>	Other	<p>If this bill is passed (which it shouldn't) then we will become a holiday destination for the dying, in the same way a parent will move home to be closer to a particular school.</p> <p>The questionnaire assumes the bill is passed and the questions lead the person to make an either or decisions on how the person will die. Where are the range of ethical questions? Is this morally right? Do we have the right to decide how we die?</p> <p>For a society raised on the values of christianity, how can we have forgotten the value of life in a few short years, to be discussing the darkness of death which is a natural consequence of life? This is all a huge step too far in the wrong direction and we should not allow this bill to pass into law.</p> <p>What happened to promoting health in our community and celebrating life?</p>

Disagree	<p>I have concerns as to where you draw the line. As you know the law continually evolves. Once accepted there seems to be no limit as to how far the law will go.</p> <p>1) It is the duty of healthcare professionals to preserve life- Anyone who is terminally ill is given care to an extent that pain relief is given to them to make them comfortable. I do not feel it is the right of anyone to determine whether someone shall live or die.</p> <p>2) It has been proven objectively that those who do wish to end their life, in their very last moments often have last minute change of mind. This is evidenced in enquiries into events leading to death.</p> <p>3) what will be the age limit? if you have a 20 year old who is suicidal and has a chance of a quality of life so you allow for assisted suicide if they are mentally unwell.</p> <p>4) There is inadequacy in mental health services and care services on island, this should be addressed first.</p> <p>5) There is consideration given to allowing people to have these medicines, dangerous medicines with the potential to kill at home, has there been consideration given to the potential access to these medications by younger people, suicidal persons etc.</p> <p>6)I have concerns about the 'professionals' who are determining whether an individual is fit for assisted dying. You say that a person may be referred to a psychiatrist. Can this be a private psychiatrist paid for by the individual. What level of qualification is this psychiatrist going to have.</p> <p>7) This bill is being pushed on the public and normalised. This in my opinion is essentially controlled and government approved genocide and a way for the government to rid themselves of persons that they deem to be a</p>	Not Answered		
Agree	<p>My Mother, Father and Mother in law died from painful, humiliating and lingering deaths from cancer.</p>	For over 5 years		

	<p>Disagree</p> <p>It is very clear from all the available evidence worldwide, that taking such a step would forever change respect for life, relationships with health professionals, and the dignity, respect for and equal rights of vulnerable people and those with disabilities.</p> <p>In spite of protests otherwise, it has been clearly shown to be impossible to prevent the boundaries of any legislation being further and further eroded - until it becomes simply a matter of health economics (as in Canada), or the forced removal of people considered a burden (as in Belgium and the Netherlands).</p> <p>It has also been clearly shown to INCREASE the level of suicides, once it has become socially acceptable to end life.</p>	<p>Not Answered</p>	<p>It is very clear that this so-called consultation is completely unbalanced and unable to be relied upon. Many of the questions are written from the assumption that such legislation is inevitable - a clear sign that there is a pre-determined outcome, and that the consultation is simply designed to support this.</p> <p>One of the greatest weaknesses of the entire argument is the measure of life-expectancy: good doctors will freely admit that this is impossible to predict accurately. My own best friend/best man and a previous IOM resident was given a maximum 6 month terminal diagnosis in October 2021 through untreatable Oesophageal cancer - but is now cancer-free, and simply recovering from issues related to his medical treatment (feeding tubes).</p> <p>Another problem impossible for legislation to handle, is that people given difficult diagnoses are highly likely to suffer from depressive illness. Making a decision to end life under such circumstances would be intolerable - after all one of the strongest arguments against capital punishment is that mistakes cannot be rectified!</p> <p>It is also very clear that once enacted, a series of weakenings of any so-called protections in law will follow rapidly - until, as in Canada we see it becoming a matter of political or health economics - where children, people with mental illness or non-life threatening health conditions, children and anyone else considered a burden are encouraged to end their life - or, as is obviously happening in Europe, imposing that decision (we used to call it murder).</p>
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Disagree	<p>As a Consultant in Intensive Care Medicine, I am passionately opposed to assisted dying: it is uncontrollable, unethical, and unnecessary.</p> <p>As we have seen in other jurisdictions, assisted dying starts with the mentally competent terminally ill, but inevitably extends to those with chronic illnesses, disabilities, and even the mentally ill and children. Assisted suicides don't always progress smoothly, and there will inevitably be those deaths that require conversion to euthanasia.</p> <p>Assisted suicide and euthanasia are not progressive, increasing choice at the end of life; they are regressive, constraining the choices of the most vulnerable in our society so they feel (through internal or external pressures) they have no option but to end their lives prematurely. I also worry that many healthcare professionals will be compelled to participate, contravening their consciences. Killing will become a 'treatment option' that they must discuss with patients. Even your own proposal requires, 'a referral to another consenting doctor should be made if the initial doctor declined to assist the patient because of their personal beliefs' - this is complicity and I for one would not be prepared to participate in any way whatsoever. Medicalised killing is anathema to the foundations of our profession, which exists to care for patients to the very end of their natural lives. Assisting suicide was opposed by Hippocrates and opposition remains the norm to this day, as the World Medical Association agrees.</p> <p>In many years of caring for the dying on a day-to-day basis, I have only once encountered a patient where I contemplated the option of ending their life prematurely might be of benefit. I was entirely wrong - that suffering</p>	For over 5 years	
Disagree	<p>It is not possible to enact law that will safely legalise euthanasia or assisted suicide.</p> <p>People diagnosed with terminal illness frequently feel under pressure to die from outside sources, e.g. I'm a burden on my family; I'm using up financial resources that should go to my descendants. There may even be unscrupulous family members who play on those fears for their own benefit.</p> <p>What is required is appropriate counselling for the sufferer, and easy access to high quality palliative care.</p> <p>A detailed study of 8000 Irish adults from Briggs, Ward & Kenny - 'The Wish to die in later life' (2021) - revealed that over time those people who expressed a wish to die changed their minds, and furthermore, the longer time goes on the likelihood of a change of mind increases.</p>	Not Answered	<p>Once assisted suicide/euthanasia is enshrined in law there will be continuing pressure to remove safeguards, lower age limits, reduce medical involvement and so on, as has been the case in Canada. A useful guide is the way that the 'home abortion' pill was introduced during lockdown as a temporary measure has now been made permanent.</p>

Disagree	<p>My wife died about 5 years ago of Motor Neuron Disease; as expected her last months were very difficult for her and those caring for her.</p> <p>At times she said she wanted her life to end. But a few hours/days later she would change her mind. Often her motivation for communicating this was because of the trouble she was causing me, and others caring for her. She did have certain choices about the level of care she received, and certainly did not want her life extended by excessive intervention, she signed a 'do not resuscitate' order for example, but this is very different from assisted dying.</p> <p>I believe legalizing assisted dying would put subtle pressure on those thought to be terminally ill to hasten their death so they would not burden others or society at large.</p> <p>It is also worth mentioning that the diagnosis of terminally ill is far from an exact science. Some diagnosed as terminally ill, live many years beyond that expected (Stephen Hawking being a notable example; who although severely disabled lead a fulfilling life). How many lives would be lost significantly earlier than necessary should such legislation be introduced? Such legislation would also be against the Hippocratic Oath that doctor's have traditionally held to (they would almost be making a hypocritic oath instead). I believe doctors would feel pressured to give this treatment (despite assurances to the contrary).</p> <p>It is also possible that new treatments may become available to the terminally ill patient, early death may thus have robbed them from that (albeit unlikely) opportunity.</p>	Other	<p>This question assumes the respondent agrees with assisted dying, I do not, so the question does not apply.</p> <p>Questions 12 - 27 all basically ASSUME assisted dying is going to be allowed, and then ask how it should be implemented. Since I do not agree with assisted dying in any form, I cannot answer most of these questions without giving the impression that I am supporting assisted dying (with said safeguards).</p> <p>Comments:-</p> <p>12.) I do not believe assisted dying should be available to anyone, irrespective of age</p> <p>13.) I do not believe assisted dying should be available to anyone., irrespective of residency.</p> <p>14.) Ditto 13</p> <p>15.) What would stop a patient seeking out doctors they know would support them; hence no real independence is possible.</p> <p>16.) Yes, but there would be pressure to conform. I believe it should remain illegal to assist someone to die; so health professionals do not need to make such challenging moral decisions.</p> <p>17.) Yes, patients talking about ending their life should always have the option to speak to a psychiatrist; suicidal thoughts are considered a mental illness, and should continued to be viewed thus.</p> <p>18.) This is an unreasonable demand on doctors. It is much more clear cut if the option of assisted dying remains against the law; then there can be no ambiguity. Of course anyone suffering terminal/long-term illness should always be offered as many palliative care, and other support options as possible.</p> <p>19.) Since I believe assisted dying should remain illegal and such declaration would have no meaning in law.</p> <p>20.) Again this question assume I agree with assisted dying. I do not,</p>
Disagree		Not Answered	
Disagree	<p>Having been involved with both my son and husband going through life threatening and terminal illnesses I understand how amazingly precious life is and how valuable every person is, no matter how old, young, sick or disabled they are, from birth to natural death. I understand the pressures both on those who are ill and those who care for them, but I do know that with good care whether it be palliative at home or in a hospice, people can live , knowing they are loved until they die naturally. Because of the present legislation there is no fear that either the one who is sick or those caring would feel under duress to end a life.</p> <p>Also, it can't be right for Doctors and health care professionals be forced into killing, or help kill another human being, the very people they came into their profession to heal.</p> <p>Unfortunately, once on the statute books these laws get increasingly liberal, as in the 1968 Abortion Act, and in countries where Assisted suicide and Euthanasia have been legalised this has happened.</p>	Not Answered	

Disagree	Totally disagree because of the fear that it poses a risk to the vulnerable and because a person’s lifespan should be in God’s hands alone.	Not Answered	Most of the above questions omit the option to disagree. The Bible makes it clear how much God loves us. He knows us individually. The writer of the Bible book, Psalms, says of God, ‘you created my inmost being; you knit me together in my mother’s womb. I praise you because I am fearfully and wonderfully made’. God knows us all intimately. In the Bible books, Matthew and Luke, Jesus tells his followers ‘the very hairs of your head are numbered’ In other words we totally disagree with assisted dying being introduced and we pray for all those who are in agreement with it
Disagree	<p>The constitution and laws of the Isle of Man are based on the teachings contained in the Holy Bible. The scriptures describe in detail the Divine perspective on all matters of human conduct, and have been the basis of a legal system which has allowed over 1000 years of justice and good government, and provided a firm and unchanging foundation for an orderly and just society.</p> <p>We abandon these principles at our peril, as within the confines of our earthly wisdom we cannot possibly predict the unintended consequences of our actions.</p> <p>One fundamental principle has always been that it is wrong for an individual to take human life, and this would include providing the means for another to take their own life. This is succinctly stated in the 10 commandments as 'You shall not kill', which is clearly universal in its application, and applies to the killing of another or yourself.</p> <p>God clearly expects that the time of our living and dying to be His choice, not ours.</p> <p>One example of unintended consequences is the way a person may think they are doing the best for everyone else by not being a burden to them. The proposed safeguards provide no protection for this.</p> <p>Already many old or ill people see themselves as a burden to others and out of altruistic feelings for those charged with their care may decide to end their own life.</p> <p>This would be a tragic consequence of a kind of hidden peer pressure causing someone to break one of God's most fundamental laws for the convenience of others.</p>	Not Answered	<p>Any bill would have to contain details and limitations with regard to the process, otherwise undesirable and unforeseen practices may develop, which would then be outside to reach of the law. However, I am hoping that the bill will not be passed, so that any such safeguards will not be necessary</p>

Agree	Individual choice - as we tend to have as birthing mothers. Choice at the start and choice at the end.	Not Answered	<p>With watertight processes, this is about choice not the myth rhetoric that quotes ‘the vulnerable would be at risk’.</p> <p>The instigation of this tool would always begin with the individual; this could be many decades before any requirement. Similar to a power of attorney, you would be completely mentally competent with your thoughts, feeling and actions when you think about whether this is for you - you may never use it but that peace of mind would be there for registration if needed (supported by medics should that time arrive; relatives would have no say). The paperwork would be activated once the criteria, laid out by the individual earlier in life, had met the need for end of life - his choice.</p> <p>Unfortunately, the Western world remains uncomfortable with death.</p> <p>Having watched three close humans suffer in pain, I’d sign up for this today to ease my own suffering and those close to me.</p>
Agree	If an individual is terminally ill with little or no hope of recovery and face their remaining time in pain with no quality of life possible. they should have the right to have their own life terminated. Obviously, certain safeguards and procedures need to be in place to prevent abuse of these laws by third parties, but an individual who is mentally aware and competent should have the option if no possibility of recovery is available. To have someone else, albeit a medically trained professional individual or board condemn another human being to a remaining life of pain, misery and hopelessness. is in my opinion wrong. The effects upon other family members having to see their loved one suffer and deteriorate should also not be ignored.	Other	<p>Possibly ten years or more, I don't think we should become an open door for people from other jurisdictions.</p> <p>The legal and moral implications of such a law are obviously immeasurable and I do not profess to understand any of it, it is for people better read/educated than myself to debate. This is just a gut feeling on the subject, having answered a few simple questions on the matter and I do not envy those tasked with exploring the possibilities of such a bill.</p>
Agree	Should be a choice we can make	Not Answered	
Agree	Medical intervention does not always prolong life it often prolongs death. Some illnesses are so debilitating that quality of life is diminished (MND, locked in syndrome) to the point where the person, who is of sound mind, does not want to live that way. They should be entitled to make this decision.	For over 5 years	<p>Full assessment by an independent team of medical professionals should be considered.</p>
Disagree	The morally right thing is to offer every spiritual, mental and physical help to deter someone contemplating suicide from ending their God given life.	Not Answered	<p>As well as aiding and abeting suicide being evil in itself, it opens the door to many abuses such as coercion, and much corruption, such as the euphemistic language of 'assissted dying'. It could graually be considered an unnecessary expenditure to provide state of the art palliative care, to the great detriment of civilised society.</p>
Agree	Both my Parents died a long painful death.	Not Answered	

Agree	<p>I have been in the position of both having Cancer looming over my head and also from a professional point where I have cared for people on end of life.</p> <p>I have witnessed the needless pain and suffering that people are forced to go through, It is heart breaking that we would allow such suffering for the person as well as those around them.</p> <p>Due to my experience I want the choice, when my time comes. I do not want to suffer or have my loved ones watching me fade away. I want to be in control, it is my right to choose.</p>	Not Answered	
Disagree	<p>I believe that human life is precious and that nobody has the right to take another person's life. I also fear that insufficient safeguards would be in place to protect the vulnerable. 25 years ago I was paralysed from the neck down and in terrible pain. I was told I would never walk again and would need constant care but now I lead a normal life and am very happy. I am in my mid sixties.</p>	Not Answered	
Disagree	<p>There is already evidence that some sufferers have been subject to relative's persuasion that it would be in their best interests to die sooner rather than later in countries where assisted dying has become legal. Secondly, people suffering are unlikely to make permanent rational decisions on when they should die.</p> <p>In respect of society generally, there is clearly a risk that once 'assisted dying' becomes legal for those classified as terminally ill, there will be pressure to apply the same proposal for others suffering severe disease or incapacity.</p> <p>Society should not have the legal right to persuade sufferers when to die.</p>	For over 5 years	<p>Most of the questions have been asked on the basis that 'assisted dying' will be legalised, whereas the first decision ought to be whether it the practice should be lawful.</p>
Agree	<p>I watched both of my parents suffer and die from dementia.</p>	For over 5 years	<p>Having watched both my parents die, I am of the opinion that this places excessive distress on family.</p>
Disagree	<p>I believe in the sanctity of life and that more resources should be available for end of life care rather than assisted dying.</p> <p>I have great concern about the way assisted suicide has developed in other countries, especially in Canada.</p> <p>There can be no safeguards against coercion by family members and others who would benefit from the dead persons will.</p>	Not Answered	
Not Sure	<p>I am not sure that we fully support individuals at the present time to be able to understand and cope with their diagnosis and treatment / care options</p>	Other	<p>Who are the two doctors? What training have they had? How much information need to be provided to be able to decide of a patients diagnosis is certain and their prognosis? What about conflict between the patient and their relatives?</p>
Disagree	<p>I believe that having an island that becomes renowned for the business of bringing about death is a real negative for this nation. We want to be known for positive things and I don't think this bill will bring anything positive for our island in the long term.</p>	Not Answered	<p>I think we only need to look to Auschwitz where the gas chambers were used for involuntary assisted dying. Bringing death to a land has bigger ramifications than what is being considered here. There is a deep feeling of depression when visiting Auschwitz and it is not just the thought of what happened. There is a tangible horrible negative feeling in that place I fear you are inviting a lot of negativity onto this island which is really not welcome or necessary. Can we please focus on making the island a more positive place to live and not somewhere people will come to die.</p>

Agree	Everyone should be able to choose and kept alive for the sake of it.	Not Answered	
Agree	Allows the individual with the terminal illness dignity to arrange their own passing in their own time.	For over 5 years	<p>This consultative process has been well thought out and all pertinent areas, for me, have been clearly articulated.</p> <p>I would not wish the IOM to become like Switzerland with patients flying in to achieve their wishes. That's why it's so important to those wishing to elect to have assisted dying as an option that they have lived on the IOM for 5 years (or more of course)</p> <p>This area has been fully debated for many years and it's now time to legislate this positively to happen in the near future.</p>
Agree	Provided they are truly terminally in then yes	For over 1 year	
Disagree	I believe that God is the only one who has right to determine life and death. Also with the quality of palliative care available on the island no one needs to suffer.	Not Answered	
Agree	Forcing a terminally ill person to endure terrible pain and anguish at the end of their life is inhumane.	For over 1 year	<p>Question 27 is the key consideration. If being of sound mind you define the terms under which you wish assisted dying to be implemented it gives everyone the opportunity to make that decision.</p> <p>If you have a long term illness without the possibility to recover you should be able to say - if I can't xyz then please help me out. Two doctors can then assess if you meet those criteria within a framework.</p>
Disagree	Terminally ill people are valuable human beings. Every effort should be made to ensure palliative care is available for those suffering chronic illnesses. It is inhuman to make such people think they are no longer important or valuable and to encourage them to end their lives.	Not Answered	<p>Assisted dying should not be available to anyone.</p> <p>In a civilised society, such a bill should not even be considered.</p>

Disagree	<p>- We have some of the best palliative care in the world, with modern medicine able to control pain relief. We should be focusing on further improving this area, rather than promoting “assisted suicide” - which is what this really is!</p> <p>- It is uncontrollable & open to abuse. However many so called “safeguards” are initially set, it has been shown possible for these to be systematically removed/withdrawn over time, as has happened in Canada (moved from “terminally ill” to chronically ill and now includes those who are disabled & even mentally ill, leaving some of society’s most vulnerable people at the mercy of unethical individuals & practices.</p> <p>- Many in the medical profession (Doctors, nurses, hospice workers that I know of) do not want this, believing that the Hippocratic oath to preserve life, should be adhered to - particularly given modern medicine’s continuing advances.</p> <p>- The island could struggle to attract the necessary medical staff going forward if it became known as a place where death rather than care & cure was a “preferred option” for vulnerable individuals or, God forbid, a way of “cutting costs” in our NHS and reducing Government costs in terms of State Pension commitments!</p> <p>- The Isle of Man is a beautiful place to LIVE - it would be awful if it developed a reputation as a “tourist destination” for suicide!</p> <p>- There are many cases where people given “less than 6 months to live” have gone on to live for much longer periods and in some cases have made a full recovery. An Aunt of mine given 6 months to live, went on to live happily for another 30 years! I am also aware of individuals diagnosed with cancer and given “months” to live, making a full recovery. Whether this is due to “misdiagnosis”, availability of so called “miracle drugs” providing a</p>	Other	99years minimum	<p>In addition to my comments in Q8 above....</p> <p>- The way this questionnaire is worded and the whole process itself is “skewed/biased” toward an assumption that I am “in favour” of assisted dying (suicide!) I am NOT.</p> <p>- How is it that the results of a supposedly “impartial” questionnaire are directed to and controlled by the person who is bringing the private members bill - I.e. Dr Allinson?</p> <p>- Will there be a further opportunity to comment on any draft legislation, if this Private Members Bill goes forward? My understanding is that draft legislation should be produced and consulted on!</p> <p>- When did healthcare change from being about life saving to life taking? What is the value of a life, or is it determined now by political directive & criteria?</p> <p>- The example of Canada, where original safeguards have now been removed over time and where those individuals determined to be “terminal” (read “considered to be of less value, greater inconvenience, or a cost to society”!) are being coerced into taking their own lives, is deplorable in a world where “modern medicine” is advancing all the time and can give both relief and longevity to a vulnerable individual</p> <p>In addition , “Assisted Dying” (suicide) brings:</p> <ol style="list-style-type: none">1. Increased danger of abuse2. It normalises suicide3. It brings pressure on an individual to “do the right thing”4. In society & post pandemic there are more people now with “mental illness”. This brings an increased predisposition to suicidal <p>While I agree that participation by medical professionals should be according to their beliefs and conscience, I do not think that they should be in a position to dictate to others who have a different belief and viewpoint.</p>
Agree	<p>I feel that, with safeguards, individuals should have a choice as to how and when to die.</p>		For over 1 year	

Disagree		Not Answered	<p>This could cause many problems in the future, take a look at how the rules have changed in canada since they put this in to their law. The rules have changed massively.</p> <p>Dr Allinson should not be involved in this whatsoever. It is inappropriate. I feel this is only being started in the isle of man as a bridge for the UK to get on board aswell. It is wrong. If Dr Allinson is being paid under handedly, to push this legislation, it's wrong and of this is the case then he should be ashamed and prosecuted accordingly.</p> <p>It is inappropriate to put a medical person in this position also. They're job is to help people live not to make a decision on whether it is a good idea for that person to die or not.</p> <p>Dr Allinson you are not God and neither are the doctors and nobody should be put in that position, which could be detrimental to their mental health and future as much as the patients involved.</p> <p>What if it goes wrong, will the 2 doctors be prosecuted ?</p> <p>Why are you really doing this? Is it to reduce the costs of people requiring the nhs or prescriptions? You cant make money by killing people off?</p> <p>This is not right no matter which way you look at it.</p>
Disagree	Good care is allowing people to live until they die....not kill before their time	Not Answered	<p>1: On NO account should this be permitted. There is no such thing as euthanasia, it murder, the argument against the slippery slope is useless; Germany was the most sophisticated country in europe in 30s..</p> <p>2: as a retired Reg Nurse (SRN) it is also a professional insult to imply that adequare care cannot be given by medical staff.</p> <p>3: it will place subtle pressure to ‘speed’ death of relatives, especially where money is concerned!</p> <p>4: there MUST be an age limit, eg over 25</p> <p>5: there must be NO psychiatric condition either at time of report or historical</p> <p>There should not be a process to provide assisted dying under any circumstances. It should remain totally illegal.</p>
Disagree	The evidence where assisted dying has been made legal is that the criteria become progressively wider, often to very spurious factors. It increases pressure on people at a very vulnerable time and evidence shows that the unfounded fear of being a burden to others is a key factor. The right to die becomes a duty to die. There is no completely safe and effective way of facilitating it and professional medical organisations as well as hospices and palliative care providers are opposed to it.	Not Answered	

Disagree	I believe passing new legislation to legalize assisted dying is the thin edge of a wedge to abuse and pressure on vulnerable individuals to relieve themselves of a perceived burden on relatives, friends and the state. The legal system should never be used and palliative treatment and management of the end of life for everyone should be both personal and private decision between a patient and his/ her doctor. This legislation could destroy all trust in the health care services provided here on the IOM, regardless of the stated safeguards offered.	Not Answered	The questions asked within this survey appear to be skewed to promote a positive response to assisted dying.
Disagree	because i think it's wrong what are trying do people should be able to die when they want and when the time is right.	Not Answered	i think people should be able to die in their own time. its taking a life that could actually recover from an illness.
Disagree	For many years I worked for Marie Curie, caring for terminally ill patients, I also cared for my sister as she died of cancer. From my experience as a carer, I do not think assisted dying should be permitted. It is unethical to end a life, the government should support the hospice and care at home for those who are terminally ill. I have concerns that allowing assisted dying would put pressure on medical staff and families. I feel that if this was allowed it would have a snowball effect, with laws being relaxed in the future to allow euthanasia.	Not Answered	This consultation is severely biased, with many of the questions suggesting that it is a done deal. I feel the stretched NHS is trying to lighten its load by encouraging the bill. I fear that people who are sick will be coerced into agreeing to assisted dying, that families will be put under pressure, that people could be taken advantage of. The process of death I have witnessed many times, I have comforted families and enabled people to die with dignity. From the experience of other countries i think this is not something the Isle of Man should ever consider. I would not want the Isle of Man to be a country where Helping people to die, became a reason to live here. The Isle of Man has many wonderful qualities, things it is known and loved for. Let us never be a place for "suicide tourism"
Agree	to allow a person to die with dignity and avoid needless suffering and/or deterioration of the mind and body in their functions	Not Answered	
Disagree	Because, in principal, I believe in the sanctity of life from conception to death and that it is morally wrong for a person to make a judgement on whether or not a life is worth living. Death, in other words, is never a good treatment for any condition (I am a doctor)	Not Answered	‘Terminal illness’ is a very vague concept. It is impossible to determine how long a person will survive even with a serious disease - there are so many factors involved. I have known patients who were given 6 months to live and survived for years. What one person regards as ‘intolerable’ another will see as a challenge to be overcome. Even those with serious degenerative disorders can have lives which are rich with joy. It all depends on their attitude and that of those around them. There is absolutely no need for anyone to suffer chronic pain in this day of modern analgesics. Therefore the prospect of increasing pain need not be an issue, and good medical services should be able to reassure a person with, for example, inoperable bone cancer, that they will not have to face that awful future.

Disagree	I disagree because I feel that people should be supported at the end of life not encouraged to end it and I feel that they would be encouraged to end their lives as we have seen in other countries who have allowed euthanasia with people citing being a burden to their family as a reason to die. People with mental health issues and the frail elderly would be particularly suseptable to coercion in this matter. Any safeguards would be impossible to implement fully.	Not Answered	
Agree	I would not want to get to a state where there is no quality of life. Just existing. Having looked after my Mother who deteriorated over 8 years, if she had been a dog, I would have put her down 4 yrs before she died. Put her out of her mental and physical misery. She lived to 101 I will not put my children through that. I would like to end my life with dignity and their blessing and save me and them a lot of anguish as well as needless pressure on an overworked health service. I would like to have the choice of when and where I can die. I agree that safeguards have to be put in place and all circumstances taken into consideration, but surely we can do that? If I have the right to take a life in an abortion, why is it so wrong to want to die if my life no longer has meaning in this world? I vote for assisted dying.	Not Answered	You have based this questionnaire on terminal illness . I would like it to be a constitutional right that anyone can apply for assisted dying. Maybe different processes will have to be put in place for different situations. It should be available to all. Full stop.
Disagree		Not Answered	
Agree	1. Few people in this country have actual hands-on experience of assisted dying. 2. In a landmark 2020 British Medical Association members’ survey, 50% of members said they support changing the law to allow terminally ill and incurably suffering adults the option of a legal assisted death. The survey found just 39% took the opposite view. Furthermore, 40% said the BMA itself should actively support such a change in the law, with just 33% opposed, and 21% neutral – meaning a clear majority want the BMA to change its current policy of opposition to assisted dying. 3. The largest poll ever conducted (Populus March 2019) on assisted dying found that 84 per cent of people in Great Britain support a change in the law on assisted dying. A survey of more than 5,000 people from England, Wales and Scotland said they would support a change in the law to allow terminally ill, mentally competent adults to have an assisted death, provided they met strict upfront safeguards. The poll found that support is consistently strong across demographics including gender, age, social grade and region. There is even stronger support for assisted dying for terminally ill people amongst people who stated they had a disability, while there is broad support for assisted dying across most faith groups, including more than 82 per cent support amongst Christians. 4. It appears to be generally assumed, incorrectly, that doctors would administer the necessary means of death in assisted death. There is no reason why there should not be official state-provided such administrators. 5. Judging from letters in the press, media interviews and hand-delivered anti-assisted dying leaflets, what opposition there is to assisted dying appears to be largely emotion-based rather than reasoned argument. There is nothing wrong with strong emotion, the problems arise if one has	Not Answered	The person who administers the means of assisted dying need not be a medic (GP). It could be a state appointed official. This would mean that doctors are not forced to compromise their hyppocratic oath.

Disagree	<p>Enabling the lawful killing of human beings, or helping them to kill themselves, is not only profoundly morally wrong, but will open a dark door into a future where the preciousness and sanctity of human life is gradually but steadily lost to view, in favour of a grim, utilitarian calculus that will inevitably favour the powerful over the weak and vulnerable. This is already coming to pass in other countries - see Canada, Belgium and the Netherlands in particular - which have gone down this route, notwithstanding all the talk of "safeguards" that were meant to reassure people. And it is coming to pass more rapidly than almost anyone expected. Once the Rubicon is crossed whereby euthanasia and assisted suicide are seen as legitimate personal choices, no initial "safeguards" (inevitably dispensable) will hold back the tide whereby utilitarian and libertarian arguments will lead to a steady broadening of the circumstances in which homicide and suicide are considered defensible “options” – including (as we see in multiple countries now) physical or mental disability, depression, poverty and so on.</p> <p>Once this process begins, the disabled, the elderly, the poor and destitute have every reason to fear that the society of which they are a part will consider the value of their continued existence an open question. Some will even question it themselves - wondering whether, in their dependent state, they are after all worth all the time, money and worry that their care involves, or whether it would be the decent thing to relieve their loved ones, “our NHS” and wider society of the burden they would be encouraged to see themselves as. This is now happening in other countries as we speak: please, please, learn the terrifying lessons of their experience and save this country from the same fate.</p>	Not Answered	<p>Many parts of this survey are question-begging in the extreme, offering only responses which already assume support for euthanasia, as though the only matters to be resolved are the details of how it will be implemented. If I may say so this seems, to put it mildly, disingenuous, and may lead some to wonder what the intention of posing such questions really is, and to what uses the answers will be put. I pray I'm wrong and that this is accidental.</p>
Disagree		Not Answered	Don't progress it
Disagree	<p>Terminally ill people will feel under pressure to end their lives. The right to die quickly turns into a duty to die, as shown by countries where assisted suicide is legal.</p> <p>True compassion for those who are terminally ill means improving the availability of high quality palliative care. Legalising euthenasia and assisted suicide will reduce investment in end-of-life care.</p> <p>Leading disability rights groups in the UK oppose changing the law.</p> <p>Legalising assisted suicide is open to abuse by unscrupulous family members with ulterior motives.</p> <p>Not enough testing has been done of the drug cocktails given to induce death, causing some distressing and drawn out deaths.</p>	Not Answered	
Agree	<p>Personally feel it is very wrong to suffer so much daily - Dogs, Cats e.g. have to be put to sleep to stop their suffering - it should be the same for people.</p>	Not Answered	

Agree	<p>I believe I should have the right to decide how I wish to die . I have seen suffering despite palliative care . I have a friend with motor neurone disease & watching her has made me more determined that we should have a choice . She does not want to end her life unless the situation becomes unbearable , which it most probably will , what an awful prospect , not just for her but her children , I'm sure they would not want to her to suffer unnecessarily</p>	Not Answered	The law is out of touch with the general population's views
Disagree	<p>Assisted suicide is part pf the slippery slope to euthanasia. In all the countries in which assisted suicide has been legalised, all the safeguards initially enacted get brushed away, one by one, as exceptions to the safeguards are challenged for the 'hard cases.' This has happened in Belgium, Holland, Oregon and in the parts of Canada. In some of these countries, assisted suicide is also being changed currently to facilitate the deaths of mentally ill children. All quite disgraceful.</p> <p>Most of the reasons that people request assisted suicide is because they fear being a burden on relatives and they fear the loss of bodily autonomy. This is where good palliative care and end of life care should kick in. People who feel loved and cared for do not request assisted suicide. The more assisted suicide is legalised, the less money will be put in to palliative and hospice care.</p> <p>Assisted suicide is not a compassionate response. It is society giving up on the good in life. Life is always a good. As a humane society, it is own duty to care for those less fortunate than ourselves, not provide the means for them to commit suicide and, what about the medical profession who will be forced to kill them? Most doctors are against assisted suicide after the Dr Harold Shipman excesses. Such actions goes directly against the Hippocratic Oath - 'First do no harm'.</p>	Not Answered	The questions were rather skewed giving no perspective for people who did not agree with assisted suicide at all.
Agree	<p>People should have the right to stop suffering. Stop the pain instead of being made to bear it or just being sedated for the last part of their life. Dignity in dying</p>	Not Answered	<p>Drug should be administered by a hcp not collected from pharmacist, whether this is in a hospital type facility or a hcp in their own home.</p> <p>I think a hcp should only be present from ingestion to death if the patient wishes so. If not then on their own or with family until family inform they think they have passed or after a set amount of time where the drug should have worked</p>
Agree	<p>It is more humane than having the terminally ill suffer further, despite palative care. Also it is kinder and more considerate of the relatives who in many cases, have to endure watching their loved one, die over a longer period of time than is necessary.</p>	Not Answered	<p>I feel the bill should include those who have no quality of life and who are living their last days, months, years in a vegetable state, who have no mobility nor mental awareness, have to be fed intravenously and are subject to a Power of Attorney.</p> <p>In such cases, the patient in my opinion is terminally ill.</p>

Agree	IVF and family planning already give choice over the start of life. Abortion already gives choice over end of life. Terminal illness and suffering could be helped by choosing assisted dying.	Not Answered		
Disagree	Life is not ours to take. With the increased knowledge and skill of palliative care available this will give the dying person the hope of a dignified death . Where does this bill lead to? . Does this mean that the loM becomes a gateway for all people to use this service. . It is common practice to ask people if they DNR. Will the next question be “do you want to avail of Assisted death.” . Evidence from countries with this legislation in place talk about the slippery slope of assisted dying opening up to other groups. I have not responded to the rest of the questions as they are written in such a way as to assume I agree on assisted dying.	Not Answered		
Disagree	I feel that it will cause people to be coerced into dying to save others from caring for them.	For over 5 years		
Disagree	Life is precious, and given by Almighty God, a day to be born, and a day to die. It is not for man to interfere with God's timing. Elderly people will be put under pressure by the medics and family to terminate life, which is not right, and will lead to fear and anxiety.	Other	It doesn't matter where one lives, Assisted Dying is wrong in the sight of God.	All the above questions are irrelevant, as Assisted Dying is wrong, and should not be considered
Disagree	Although I am sympathetic to those who are suffering with terminal illneess, I feel that if this legislation were to be introduced it would open the door to the abuse of vulnerable people. I have spoken to someone who works in palliative care and I am satisfied that sufficient care is taken to alleviate pain when it becomes necessary.	Not Answered		

Agree	<p>A person should have the choice made available to them including the method of delivery (a person wishing to die, may not be capable of administering the means to do so themselves).</p> <p>Loved ones will discuss the subject anyway - the "what if" scenario and when freely done, the decision for the partner to assist with the termination on behalf of the loved one can be made easier (terminal situation following an accident - "living" but without quality of life!).</p> <p>Unfortunately this is at odds with the physicians hippocratic oath to use their power to help the sick to the best of their ability and judgement; abstaining from harming or wronging any person by their knowledge.</p> <p>Any law introduced must take this "oath" and "prior wishes" into account.</p> <p>The wording of any new assisted dying law must be very carefully written.</p>	Other	<p>No comment box for item 13. None residents should be able to take advantage of any assisted dying law but it must be conditional upon the reasons for dying and the provisions made as part of that law. There must also be provision made as part of the "non resident" assisted dying law for the deceased to be repatriated back to their country of origin at no cost to the IOM taxpayer.</p>	<p>See my comments in box 1.</p> <p>See my comments to item 13 (no comments possible) in item 14 comments.</p> <p>Item 16 - If all doctors "conscientiously object (Hippocratic oath) a loved one should be able to administer a lethal cocktail - under prescribed conditions written into the law - without breaking other statutes themselves.</p> <p>Item 17 doesn't take incapacity due to accident or health into account - the patient may be unable to be referred.</p> <p>Item 19 - the patient may not be able to do so (accident or illness incapacity) - I'm strongly in favour for properly recorded "living will or advanced directives" to cover incapacity of the patient, to decide how they continue to live or choose to die.</p>
Agree	<p>I have listened to the evidence provided during discussions held by "Dignity in Dying" and have read the testimonial problems outlined by some of the cases that have been highlighted by them, and it seems to me that the current attitude is totally unacceptable where governments will not sanction people who are suffering badly not have their lives medically terminated if that is their choice - A change in the law merely provides the citizen with a choice which they may never decide to initiate, although its mere existence may provide comfort to any citizen in the knowledge that if they may possibly reach a stage when they feel unable to tolerate the pain that their illness is giving them - This is just a "freedom of choice" matter for the individual and is not a matter for the State to outlaw for its citizens.</p>	Not Answered		<p>The problem is that since the changes to the GP service in the British Health Service we no longer know our individual GP - This end of life system cannot just be operated by a couple of Doctors who you've never seen before just because they are medically qualified. Moreover these questions about collecting from the pharmacist and storing your own end of life treatment at home seems somewhat lax by comparison with the level of control advocated by the Dignity in Dying programme - Some of your questions have been framed as if you are just taking a Paracetamol collected from the chemist - My understanding is that in Switzerland you just take a liquid drink in the presence of your nurse / medical administrator, and that its reasonably quick with no need for any medic to have to wait for hours to be certain that its worked as inferred by your question above.</p>
Agree	<p>I believe that a person should not be made to suffer the pain and indignities that often accompany a terminal illness. When someone who is suffering and in distress, when there is none or very little chance of recovery then it should be their choice when to end their life. It is wrong for them to have to choose to do something that is considered unlawful thereby causing additional stress and upset to be able to do this.</p>	Other	<p>Over 5 years except in circumstances where the 'patient' has had to relocate here to be cared for by family members who have been resident on the island for over 5 years.</p>	<p>Once a person has met all the criteria they should be added to a register whereby they (or an agreed representative) can make contact when they are 'ready to go'. When the time arrives a suitably qualified person should bring the drugs, administer them and be on hand whilst the drugs take effect before then confirming death. This would hopefully assist and lessen the stress on any family/loved ones present at the time.</p> <p>This method would also give the healthcare professional chance to do a final assessment and ensure that the patient is in agreement before administering the drugs.</p>

Disagree	<p>I do not believe that assisted dying should be available nor is it required. I have several friends who have experienced progressive illnesses and none have wished to terminate their lives prematurely. One friend, told she had 6 months is still alive after two years, and despite being more and more limited in what she can do is enjoying life day by day.</p> <p>In my experience when anyone has friends and/or family who love and support them there is no desire to terminate their lives prematurely.</p> <p>Modern medicine, together with Hospice provision can control pain.</p> <p>Conversely those who are vulnerable to family pressures could be too easily coerced.</p> <p>Please can you tell me how many people on the Island, annually wish to have assisted death?</p>	Other	<p>As I don 't believe anyone should be assisted to die there should be no acceptable time limit</p>	<p>This questionnaire assumes that answers must relate to there being assisted dying provision. This makes it impossible to give the answers I wish to give. e.g. If there were to be provision of assisted dying then I surely would want to see safeguards to the process such as appear in these questions. But as I don't believe there should be assisted dying provision e.g. I don't think there should be a written request by the applicant, witnessed by two doctors. It just shouldn't be allowed. But if I answered "no" it would imply I don't want the safeguard, not that I don't want the provision.</p> <p>Question 10 is "loaded". By answering "no" it appears I want someone to suffer agony. Whereas I want to indicate that I'm not satisfied that this hypothetical example is realistic.</p>
Agree	<p>Individuals should be able to decide whether they want to suffer the final effects of a terminal illness rather than being forced into a poor quality of life.</p>	Not Answered		<p>Some thought would need to be given as to how people with no family support network or without a permanent home would navigate it. For example, the option to take the medication at a health facility.</p>
Disagree	<p>Firstly, I oppose it on the grounds that it is morally wrong. You will need doctors to administer the drugs and this goes against the Hippocratic Oath, which states “First do no harm”. Secondly, I oppose it because people’s view of their situation can change; they are not set in stone. I had a very close friend who for a number of years wanted to die but never had the support to have her wishes fulfilled. Years later, she stated categorically that she was happy with her life and situation. Thirdly, I oppose it because the experience of other countries such as Holland and Canada show that once allowed for supposedly ‘extreme cases’, it is widened to include other categories, such as people with mental illness. The slippery slope is a fact rather than myth.</p>	Other	<p>I do not believe it should be available at all and my answers to Q12 and Q13 are not applicable but I cannot leave them blank.</p>	<p>As I oppose the whole concept of euthanasia, some of questions (like Q12, 15, 17, 19, 22, 23, 25) above have assumed my position is positive towards the process so I have had to answer them as I cannot leave them blank.</p> <p>I have expressed my views in Question 8.</p>
Agree	<p>As a veterinary surgeon, I regularly assess quality of life in my patients and poor quality of life with no viable options for meaningful palliative care, or terminal illness are common reasons for euthanasia. When we euthanase our animal patients for these reasons, one of the most common comments from our clients is 'I wish we could do this for people.'</p> <p>I feel that if a person of sound mind has a terminal illness, or a condition which may not be terminal, but which may have a significant adverse effect on their quality of life, then they should have the right to choose the manner of their death. Obviously there needs to be strict, robust protocols around how this is managed and under what circumstances, however, in principle I agree in the concept of assisted dying.</p>	Not Answered		<p>I am unsure about patients being able to store life ending drugs securely in their homes. I would be concerned about possible misuse/mismanagement of this situation and possibly increasing vulnerability to theft of medication.</p> <p>I think a better option would be for patients to have to attend a 'suite' at hospice or the hospital so that the drugs can be appropriately signed out by two suitably qualified professionals and placed directly under the control of the client.</p> <p>I don't necessarily feel that a professional needs to be in the room during the dying process. But that someone should perhaps be present while the client takes the medication (the professional can then leave the room if the client/family wish).</p> <p>I think there should be an option for injectable medication, which could be administered by a drip.</p>

Disagree	<p>I am concerned about your proposed legislation. Experience around the world has clearly demonstrated that there is no reliable way of introducing assisted dying laws. A number of issues have become manifest in line with expectations of Christians like myself. There is no safe way to protect the inevitably vulnerable people who resort to these ends of life options. Countries inevitably widen the access to the laws, increasing inadvertent and non-reversible outcomes. Canada, since 2016 has added mentally ill people to the scope of the law and removed the provision that death is ‘reasonably foreseeable.’ Belgium has added children with no lower age limit. With all the efforts to prevent the increasing suicides among young people the assisted dying programme embraces contradictory messages from government, medical services, etc. into society.</p> <p>The UK has some of the best developed palliative care programme in the world, but even this needs to be expanded. Making euthanasia legal will reduce investment in palliative care. There is a case in British Columbia of a hospice which refused to offer euthanasia losing \$1.5mn in funding and was thrown out of its premises.</p> <p>The drugs used have not been properly and adequately assessed. There have been cases of 100 hours until death with agonising trauma. How can we dare to undermine the doctor’s ethical codes? The patient-doctor relationship will be irrevocably undermined and confused. Relatives will be tempted to exert unfair pressures. The patients who seek early death become motivated by the desire, “not to be a burden.” It is impossible to safeguard ‘informed consent’. The individuals seeking euthanasia are all vulnerable. What is a rational decision? And for sure these decisions are irreversible. A study in Ireland of 8,000 adults found that they changed their minds over time and more so the longer time went on.</p>	For over 5 years	<p>I beg you, please don’t go down this route. It is a slippery slope. There is no return. As a Christian, I believe that all life is sacrosanct. Psalm 8 verse 4 and 5 declares: “what is mankind that you are mindful of them, human beings that you care for them? You have made them a little lower than the angels and crowned them with glory and honour.”</p> <p>In Galatians 6 the Bible says, “Do not be deceived: God cannot be mocked. A man reaps what he sows.”</p>
Disagree	<p>I am opposed to the plan to introduce euthanasia and assisted suicide to the Isle of Man. Canada introduced euthanasia and assisted suicide in 2016. Since then the law has already changed to include those of any age suffering mental illness, that death might be “reasonably foreseeable” so that doctors may intervene and help assist that person end their life. Making assisted suicide an option will undermine the work done in helping people overcome depressive illnesses. What hopelessness, like a black snake could strike and undermine all our medical staff, studying and working so diligently each day towards caring and bringing wholeness of life through medicines.</p> <p>A close member of my family ended her life in a devastating way. All who were helping her were very, very distraught. A family I know, a loving and caring family lost their daughter of fourteen to suicide; the pressure of school exams and possible bullying. In both cases I saw how shattering this was for the family and the wider community around. The emotional pain is still there 12 and 7 years on for each family.</p>	Not Answered	<p>Life is precious, it’s a joy. Pain and the ups and downs of our time here on Earth are the things we all experience, some more so. But there is a better way than this unwise dark path of death by the hands of people. We shall all be held accountable in eternity for what we as a society let loose in our brief time here.</p> <p>I have never been to the island of Jersey but I hear from those who have that it is very beautiful.</p> <p>Please reject this Bill. Thank you for your time and care. God bless you.</p>

Disagree	Iwork as a GP and see the importance of valuing life and providing high quality comfort treatments at the end of life. Option to die early devalues human life. It puts pressure on vulnerable groups and individuals and disabled persons. This pressure is further increase by concerns over inheritance or being a burden. There are enough pressures at the end of life without being offered the option to die early. There are no adequate safeguards except not offering death as an option. There is no valuing of the essential services of palliative care if death is also an option. There is huge impact on the medical profession who are there to value or care for life - if death is introduced as an option.	Not Answered	the premature ending of life should not be happening - hence the considerations in the recent questions of timing and specifics are not relevant. Thank you
Agree Disagree	People can be persuaded to end their lives if they are ill or are made to feel a trouble to their families or the family wants their money etc etc Health personnel are there to make people well not to help them end their lives	Not Answered For over 5 years	Appalling! The questions are all angled towards the possibility of assisted dying. No provision should be made AT ALL. Our lives are given us by God and it is his prerogative to bring them to an end. He knows each person better than any one else. The Bill should be stopped immediately from being considered

Disagree	Law and society should protect the vulnerable. Legalising assisted suicide does not protect people, it increases the risk that individuals with suffer irrevocable harm. It is impossible to know whether someone is under pressure from a friend, relative, or other person to die. Many people in the cost of living crisis and difficulty in healthcare provision may decide to die because they feel a burden on others. It is very difficult to predict someones life expectancy.	Not Answered	Assisted Dying should not be legalised. Legalising assisted dying will inevitably result in people dying who do not wish to, or who previously wished to but now have changed their minds. No system is perfect, healthcare is a complex system with lots of opportunities for miscommunication and misunderstanding. In the context of assisted dying the miscommunication or misunderstanding may result in an unwanted death. The overriding principle of the law should be to protect citizens. Legalising assisted dying does not protect people from harm, but rather increases the likelihood of someone dying when they did not really want to. In the current situation a patient knows that their healthcare professional will do all they can to help people live, and live as well as they can. Introducing assisted suicide fundamentally changes the relationship between healthcare professionals and people, reducing trust. People can be vulnerable accessing healthcare, this proposed change in the law makes vulnerable people even more vulnerable.
Agree	I believe it to be compassionate to allow someone dying to in great I'll health who feel they have no quality of life to be supported to end their life painlessly	Not Answered	I am against legalising assisted suicide, but if it is introduced there must be a robust and permanent provision of conscientious objection for all healthcare workers not wishing to partake in assisted suicide, at every step of the process (including doctors, nurses, administrative staff, pharmacists, porters).
Disagree	You have not spelt the word principle correctly!	Not Answered	Enabling people to keep lethal substances in their home is not a good idea, as it could result in accidental harm (such as a child or someone else accidentally ingesting the substance) or even intentional malevolent use (intentionally giving to someone else other than the
	I do NOT agree with assisted dying in any form or shape. I believe that we need good health care and support not death care and good bye.		I believe this bill is a sensible response to a challenging issue that would give people some comfort and control over there lives and death
	Please STOP bringing this to the house of Keys and waste time and resources.		I appeal to Allinson and other MHKs and their collective consciousness to STOP assisted dying becoming a law.
	Thanks		This is so wrong and fraught with so many dangers on so many fronts that won't be stopped.
			Thanks

Disagree	<p>I think this proposed bill would leave weakened, sick or elderly people open to coercion.</p> <p>There have been many who have thought to end their lives owing to crippling accident or disease, who have then continued and led a very fulfilled life.</p> <p>People regret bad choices, but in the case of assisted suicide their regret would be too late.</p> <p>In my opinion if this bill were to proceed it would be the 'thin edge of the wedge' so to speak and threaten more people who might be considered best 'out of the way'.</p> <p>This is a very real and frightening possibility.</p>	Not Answered	<p>I do not agree with the provision of assisted dying, however if a person has requested to NOT be resuscitated I think they should be allowed to die naturally.</p> <p>I also believe that pain relief during palliative care should be given if requested.</p> <p>If a person is weak, very old and generally at the natural end of their life I do not think they should be given endless medication to prolong what would naturally end in natural death.</p> <p>Assisted suicide could well become another form of execution.</p>
Agree	<p>I do not think there should be a limit on life expectancy.</p> <p>Allowing people to make an informed decision with in law, is important.</p>	For over 1 year	
Agree	<p>Being faced with a terminal diagnosis of any condition must be very tough for anyone, regardless of age. We allow termination of unborn children under certain conditions in many parts of the world, so I see no reason why an adult of sound mind cannot be enabled to make a choice to end their own life, especially if faced with unimaginable pain or hardship, either for themselves or others. It would likely also be a reason to promote the Island as a place where people can come to visit and elect assisted dying should they so wish. I imagine it would generate some income in the long term.</p>	Not Answered	<p>None other than it is a good idea and should be introduced as soon as possible. It is long overdue. In fact consideration should be given to creating a building or buildings in a green, quiet and picturesque setting where either residents or visitors who come to end life can spend their final days, weeks or months. Clearly such a facility should have to generate an income and fees should be charged regardless of whether you are resident or coming from anywhere else, although the charges for residents should be lower. A little bit like creating a high end care home with homely comforts, own rooms, service around the clock and the ability for family and friends to visit at all times. All rooms should have an outdoor area or balcony and a very liberal attitude towards drinking and or smoking given you are there to end your life anyway.</p>
Agree	<p>You put a suffering dog/horse/any animal down out of compassion. Why wouldn't that be the right thing to do for a suffering human? Is that because you love animals more than your fellow human/relative, so it would be ok to allow the human to suffer but not the animal? Or is that because your imaginary friend tells you that it's wrong?</p>	For over 5 years	<p>There was a lot of uproar mostly from religious circles and individuals at the time when Dr Allinson first proposed the Abortion Bill. The Bill is now in force, yet we don't see queues outside the abortion clinics.</p> <p>So the worries and predictions of those religious zealots were unfounded. The facility, however, is now there for those who need it.</p> <p>Similarly, when the Equality Act was being promoted, those same religious parties yet again surfaced fearmongering that the Island would be forced to turn gay almost overnight. That has not happened either, so fake news indeed.</p> <p>A law for assisted suicide should be in place for those IOM adult residents with mental capacity who qualify and who wish to end their lives whether due to terminal illness or suffering too much from a non-terminal illness or a disability. There should be a choice for everyone equally. You don't have to have an abortion or commit assisted suicide just because the law allows you to, just like you don't have to turn gay merely because there is a law in place which recognizes equal rights for all. That simple!</p> <p>Imagine: no religion ...</p>

Agree	I believe that I have a right to live how I would like, and also I want to be able to choose how and when I die.	For over 5 years	
Disagree		Not Answered	
Agree	Every human being has the right to make their own choice. Euthanasia, whether assisted or not should be made legal. As human beings we make the choice for our animals whether or not they should be put out of misery when suffering is taking place therefore why should it be any different for us.	For over 1 year	
Disagree	The island will become a magnet for those wanting assisted dying. By definition, these people will be ill and will put added strain on an already stretched health service not just for the assisted dying part but for the period of time they have to be resident on the island prior to this. Coercion or a feeling of being a burden on society / family is a major concern for me. Life Insurance.....Will Life Companies settle a claim for assisted dying? Will the death certificate make mention of assisted dying? Will the Coroner need to be involved in each case. If so this would be a significant increase in workload. Would any local doctors want to be involved with assisted dying? I've spoken to many and not found anyone to be interested in taking on this work. I think that assisted dying goes well beyond what medical training is about. I think the questions on this document are weighted in favour at agreeing with assisted dying. I've answered not sure for some questions where there is no option for not applicable.	Other	I don't agree with assisted dying. For my not sure answers read not applicable as I don't agree with assisted dying.
Agree	The individual must be able to make this decision for themselves.	For over 5 years	I think that a qualified medical professional person should be present to ensure the correct procedure is followed.
Agree	If a person is going to die I believe it's right to allow them to do so on their own terms, whenever they so desire. Those seeking assisted suicide will more likely than not either live in incredibly undesirable conditions for the rest of their life, causing unjust suffering or take matters into their own hands to avoid such an existence.	Other	There is a chance that non-permanent residents could push the limits of our already struggling healthcare services too far and cause further problems due to lack of manpower, resources or funding. It is vitally important that we do not follow in the footsteps of Canada's assisted suicide program. It has created massive strain on their health service and has prevented proper efforts and care being taken for people seeking help and many are not offered any care at all before being recommended assisted suicide. It is incredibly important that any who seek to make use of the assisted suicide program are thoroughly informed of any other possible care they may receive. I have concerns for those with crippling mental health issues who may not appear "mentally competent" or of sound mind who may require a service like this the most whose concerns may be pushed aside due to their poor innate mental health.
Agree	50 years of looking after end of life patients.	For over 1 year	
Disagree	I have no confidence sufficient safeguards to avoid misuse. I do not uphold the taking of a life prematurely in terminal illness.	Other	I do not uphold a draft Bill in favour of assisted Dying, the questions proposed lead me to answer my preference if I were in favour. How will my view point be captured from this survey?
Not Sure		Not Answered	I think it's all very difficult and the person should when it's their time

Disagree	It is my belief as a Christian that assisted dying is not a loving way to care for an individual who is struggling with terminal illness and that such a move to legalise it will open the door to a can of worms, in which emotionally and physically vulnerable people could be subjected to misleading information or even abuse which could cause them to make a decision to end their life, from which they cannot return. I believe the focus should be on delivering excellent medical, mental and palliative care to help people in this position to maintain as much dignity as possible, and to enable a quality of life and relationship for as long as possible. In my mind this is a more loving response.	Not Answered		
Disagree	I Disagree because, assisted dying is a euphemism for assisted suicide. Also the minute you allow this Bill to be passed there is always the chance for stretching the argument for further changes. This a very dangerous Bill and therefore should be blocked.	Not Answered		
Disagree	<p>A scientific approach to any issue should be based on factual evidence, not opinion, ideology or emotions.</p> <p>If we examine the evidence, facts indicate that assisted suicide is harmful for the patient, friends, family, medical staff, and society in general, whereas arguments in favour are either ideological or emotional. Feelings are notoriously volatile. A patient can regret straight away their decision, but there is no reversing death. Alleviating treatments are available in today's world, and often a patient's experience of pain may be influenced temporarily by other unrelated factors. The solution is not death, but reassurance and encouragement.</p> <p>The decision to end it all can have a devastating effect on family and friends who may not have realised the patients need simply for encouragement and reassurance. They will be left forever with feelings of guilt.</p> <p>Similarly, a patient may feel that they are a burden on friends and family, and under an obligation to end their life. The family may have had no idea that all that was required was reassurance that they were loved and appreciated, again leaving them forever with feelings of guilt and failure.</p> <p>That is not to mention the frightful scenario of family in financial difficulties wanting to acquire an inheritance sooner rather than later!</p> <p>Assisted suicide places medical staff who feel that their calling is to preserve life, not end it in an untenable situation, resulting in staffing shortages as they opt to leave the profession.</p> <p>On the other hand, for those in favour, it can lead to doctors making the decision for the patient, as has happened in the Netherlands. In 1990 around 1,000 patients were killed without their request, with the evidence that doctors sometimes do not report the fact that the patient did not die naturally. Elderly, invalid patients could become terrified of any medical</p>	For over 5 years		

Agree	<p>Acceptance of the inevitability of Death and the personal choice when THAT individuals life ends I consider a fundamental right.</p> <p>A realistic decision making matrix for guidelines and protection is needed, however as the result of such decisions are permanent, this must reflect the individuals wishes, not religious or legal dogma OR convenience.</p> <p>Pets in similar circumstances at times are treated better than humans.</p>	Not Answered	<p>View current legislation and statistics in California & Oregon USA.</p> <p>The process is deeply personal to the individual and supporting loved ones, great care is needed for unsupported individuals.</p>
Disagree	<p>Schizophrenia is a condition of the brain caused by organic processes and which causes delusions and hallucinations. There are around 280,000 people suffering from schizophrenia in the UK today of whom about 80% are being treated by the Mental Health Service.</p> <p>Suicide is a grave problem for people living with schizophrenia. Around 25% of people suffering from schizophrenia will attempt suicide within ten years of their diagnosis and around 10% of sufferers will successfully take their own life during that time. The issue of suicide in schizophrenia accounts for over 1000 deaths each year in the UK alone which represents a death toll comparable with that from road accidents.</p> <p>Yet schizophrenia is a condition which is treatable in most cases and in which the tendency to suicide can be greatly alleviated by high quality psychiatric care. Modern medicines are very effective and allied with talking therapies can result in a good recovery. In fact, given the right psychiatric care around 85% of sufferers will substantially recover and go on to lead a productive life.</p> <p>In my view it is likely that if the law on suicide were changed to allow assisted suicide then people with schizophrenia would soon be included in the list of those who would qualify (as has already happened in other countries where assisted suicide has been introduced) and many people who lack the mental capacity to make such a decision and who have the potential for a happy life in the future would lose their lives.</p> <p>The introduction of assisted suicide for people with schizophrenia would</p>	Not Answered	<p>I note all of the proposed safeguards that have been mentioned in the foregoing questions. However, none of these safeguards would have any effect for people with schizophrenia. Schizophrenia causes people to experience delusions and hallucinations which can, in its acute stage, cause them to become totally detached from reality.</p> <p>They genuinely believe in their delusions but these experiences remain unreal. Any system of safeguards, including an assessment of mental capacity, would rely on the patient being able to truly relate their wishes to the medical professionals involved and people with schizophrenia who are poorly are simply not able to do that. I cannot see that any system of safeguards can be devised which would adequately safeguard people with schizophrenia and certainly none has yet been created in any of the other countries which have introduced assisted suicide already.</p>

Disagree	<p>Question 8). This bill treats people las if they are like animals that are "put down" when suffering. It devalues human life. It is a sign of failure of a government health service.</p> <p>-----</p> <p>Question 6). It needs qualifying. There could have been a third box to click regarding that status, which would have been more helpful.</p> <p>I am a tax resident, but not yet a voting resident as I have not yet been here 5 years.</p> <p>-----</p> <p>Questions 9-28 are not "Open Questions". They make the assumption that morality can be flexible;- that this issue is not one of principle but bargaining. The questions try to "fix" the outcome, which is dishonest, like the lawyer's favourite example, "have you stopped beating your wife?" The UK parliament does not permit "closed questions" for its consultation in the select committee process - and yet the consultation document refers to the UK parliament for its examples. The questions assume partial agreement of respondents and thereby enabling them to be quoted them as being in partial agreement - fixing the outcome. It is dishonest and would fail the UK test for consultations.</p>	Not Answered		Refer to question 8 comments box.
Disagree	<p>Once you go down this line and help someone to end their life however genuine, it will open a tide for everyone to have a reason eventually, „and for thoses in a vulnerable position what than .</p>	Not Answered		<p>I don’t agree at all with assisted Dying ,ashamedly if it goes through , then there has to always be put in place steps as you’ve pointed out . I also believe that those health care professionals who for what ever reason don’t ever have to assist in this possible man made law .</p>
Agree	<p>I have personally watched terminally ill family members slowly and painfully slip away and I wouldn’t wish this on anyone; one in particular begged each time we saw her for someone to end her suffering, heartbreaking.</p> <p>This makes it sound like I am making light of the situation, but if your animal was ill you would have it put to sleep, yet the highest form of life is allowed to suffer on until the disease or illness eventually claims them.</p>	For over 5 years		
Disagree	<p>Safeguards are not water tight - every year in the UK 500,000 elderly people are psychologically, physically, sexually and financially abused most often by family and care givers, these people are vulnerable and could be coerced.</p> <p>Assisted dying can leave family members traumatised, much like suicide.</p> <p>Assisted dying legislation erodes the idea that all lives are valuable.</p>	Not Answered		<p>Question 9 and onwards are written on the basis that I agree with the principle of Assisted Dying which I do not, so I am not answering them.</p>

Disagree	<p>Firstly I m opposed to the plan to introduce euthanasia and assisted suicide. This proposed legislation contains many dangers. It may be true that there are small number of persons who distinctly want that choice, it seems clear that others who would not otherwise think about it would then think about it.</p> <p>Even at this level it seems degrading to suggest to any human being that perhaps they should choose to end their own life. I find this an affront to human dignity.</p> <p>It does not stop there, for folk may feel under pressure to take that course of action - that it might be the 'decent' thing to do or that they are being a burden.</p> <p>That is all bad enough in itself. It is difficult to assess how often it would happen but friends and relatives could apply pressure on the relevant person to end their own life. This does not have to be specifically callous, but the thought of having access to a legacy could twist an otherwise caring mind to pressure that individual into dying.</p> <p>In summary there are far, far too many dangers of any option being abused. It also goes against the sanctity of human life.</p> <p>In the worst cases it would also amount to conspiracy to murder</p>	Not Answered		A number of the questions presume legislation will be approved and difficult to answer
Agree	<p>Why leave the helpless to struggle?</p>	Not Answered		Save resources, let the dying die with dignity
Agree	<p>I think people should have the right to a graceful death, and not be forced to live out a long and painful demise at the hand of a terrible illness.</p> <p>People should be able to go out on their own terms, in a manner that best suits them and their situation.</p> <p>I’ve heard there a number of church groups trying to skew the results, which I find appalling. If they think we don’t have the right to decide when a life ends, I’d direct them back to the fact that “God” gave us free will to do with our lives as we please.</p> <p>45% of the island are not Christian, as the church folk state. People who are christened often deem themselves as Christian, when they’ve never attended a Church service in their life. And that number includes children who have no impact on this decision.</p> <p>Let’s allow people last memories if people to be pleasant ones, and not memories of an incontinent individual withering away in a hospital bed, miserable and begging for the minute they eventually pass.</p> <p>Let’s allow individuals to make these decisions themselves, not a make-believe man in the sky.</p>	For over 1 year		

Disagree	Having relatives who have committed suicide, I believe that this legislation does not safeguard anyone. It's far too easy to influence anyone who is in despair to disastrously take their own life. No limit upon life expectancy.	Not Answered	
Agree	I agree that terminally-ill people - those expected to live no more than six months - have the right to end their own lives when and where they choose, as long as no one else is actively involved.	For over 5 years	
Disagree	<p>the ramifications are very disturbing. whatever safeguards and checks are initially put in place it would be almost certain that in the fullness of time the lines between voluntary euthanasia and compulsory euthanasia would become extremely blurred .There would in time especially with a health service in crisis and a general trend to slavishly follow prevailing UK procedures , more and more pressure to move towards the latter position.. There could for example be enormous pressure placed on loving family members by overstretched medics desperately short of beds and resources . This could and would in many cases result in further anguish and guilt related mental health issues on persons who have already suffered bereavements.The would also be pressure on terminally ill patients the consequences of which are of great concern.</p> <p>There can be no doubt that in proposing assisted dying and drafting safeguards that everyone would be acting in the utmost good faith.Faith of course is at the root of this debate . The christian churches are all in agreement opposed to assisted dying . My own religion (Roman Catholic) believes it to be a sin. this is a view I share personally.We are still predominantly a christian society .We need to up our game in respect of palliative care</p>	Not Answered	in a please consider this most carefully and in particular all the foreseeable consequences
Disagree	<p>No for sure way to keep standards and safeguarding as stringent 5/10 years down the line. No way to stop the assisted dying process from becoming like Canada where 14 year olds can be helped to end their lives due to mental health issues. This is touches me on a personal level as I, myself was struggling with mental health issues at the age of 14 and if I were in Canada then I would have asked for assistance in ending my life. I wouldn't have been able to experience things that I have, sitting my GCSEs, ALevels, gone to University and get a job.</p> <p>I do not agree with this proposed assisted dying bill all.</p>	Not Answered	Most of these questions are irrelevant to me as I DO NOT agree with the proposed bill.

Disagree	I dont believe In assisted dying, And believe there are many things to still consider and can lead to things changing in many other areas.	Other	25 years	I dont think this should come to the Isle of man yet as there are many things to still consider. And could potentially lead to other permissions for someone to die happen such as mental health. In principle I think better mental health services provision. Hospice do an incredible job with palliative care. And people die a dignified peaceful passing when the proper time comes. I also wonder if some vulnerable will or could be coerced into thinking they have no choice but to go down the route of assisted dying. It's such an emotive and huge topic. It really needs to be a public address and maybe a vote to happen and achieve for the wider public to have a say or voice.
Disagree	Life is precious and God given. You start by claiming to be helping people in pain but will easily get distorted into any old people you deem undesired. Very dangerous and not a power that should be used, and certainly not given to a government/s who practically force a new vaccine they know will cause harm to people.	Not Answered		Yeh, don't do it!!!
Agree	every person should be allowed to decide when to die , when faced with unbearable suffering with no hope of recovery .	Not Answered		Q 9- If the patient has a condition causing unbearable suffering, the life expectancy limit should be irrelevant. Q12- The condition, not the age should determine if assisted dying should be available. Q13-expats/family members should be allowed to return to the island for assisted dying. Q13 other forms of communication should be used if the patient is unable to write or a living will should be allowed. Q20- If the patient is suffering the reconsidering time should be shorter. Q22-Life ending medication should not be in the hands of the patient or family until the time to use it has come. Q25-A health care professional should be on site but not with the patient unless requested.
Agree	Its should be up to individual to choice how when and where he wants to end his life. However the process of review by doctors, and to ensure the decision is not influenced by outside circumstanes must be secured legally and individual must shown his full awarnesd and rationale for it. I looked after person who was in such circumstances And all he wanted to preserve his dignity. His suffering was prolong unberable to watch for him and rest of us; its continued for over 5 years and had huge impact on others and his own well being. We have often questioned why what is the purpose of . Our relationship to death needs adjusting. We seeing death as end of life but who to say is not a begining of other life and we just prolonging sufering of those who do not want to suffer.	Not Answered		Im fully supporting assisted dying however legalised , formalised with doctors assistance after certain period passed allowing family and person to understand fully this process. I hope the bill can be legalised and we use guidance from jurisdictions who are already allowing. No one wants to die and keave loves one behind. Thats the key to this so when individual ask for it i believe there is already case to look , support and allow some level of dignity. Such voices must be heard.

Disagree	<p>This is wrong on all levels. With medical advancements all the time there are so many examples of people recovering from severe and terminal injury and illness and having good quality of life. It also conflicts with the medical profession who are surely meant to help preserve life and help people get better. This is a dangerous and a slippery slope to killing people who request it who have mental health issues. I don't want this beautiful island with its ethos to enable freedom to "flourish" to be associated with freedom to 'die', it's horrendous.</p>	Not Answered	For over 7 years	<p>The questions in this survey are so loaded in favour of the bill it's shameful -was this survey devised by a totally independent body or Dr Allinson? the whole process appears flawed and probably illegal in its structure and the consultation process as a whole. So many issues around the question of assisted dying are not touched on in the survey at all and what it does to screw up a society's view on the value of life are not covered. To have questions about nipping to the chemist to pick up your medication to kill yourself and whether you should take it back if you change your mind?! It's outrageous. There are so many mental health dangers in this and there is evidence from the few countries that have done this it is a downward spiral to expanding the choices around assisted dying.</p>
Disagree	<p>Because I disagree with the fundamental question, I do not believe there is any merit in answering following questions, which all assume I agree with your proposal.</p>	Not Answered		<p>I couldn't resist thinking if your survey is one-sided and biased!!</p> <p>I disagree with the fundamental question.</p> <p>But the follow-up questions all assume I agree with your proposal.</p> <p>This survey really should be binned, if I am honest!</p>
Disagree	<p>Because it is a hair-brained idea, that irrespective of how many safeguards you put in it will still be open to abuse. Somehow we succumbed to the idea of abortion for babies up to the age of 24 weeks....which have can survive from 20 weeks, surely we are not stupid enough to bow to peer pressure and intelligent enough not to have this here.</p>	Not Answered		<p>Bottom line is irrespective of whatever measures you put in place you will not be able to stop abuse.</p>
Disagree	<p>I don't believe any amount of promises on checks and balances will stop 'mission creep' (see the progress of abortion provision), especially by future administrations who will not be bound by such promises.</p>	Not Answered		<p>All these questions seem to point to this being a 'done deal', which is why I have omitted to answer them. Is this really a consultation, or just a covering exercise? Mission creep?</p>
Disagree	<p>One thing leads to another - euthanasia?</p> <p>Doctors are there to help patients get better, not to kill them off. Will they have the option to refuse, opt out - always?</p> <p>It would be too easy to persuade a relative in pain or distress to take the easy way out.</p> <p>A friend of mine was told she was dying of terminal stomach cancer and there was nothing they could do for her. She was abandoned by the health service being told that she had a maximum of three months to live. She went through a period of terrible pain which even morphine could not alleviate but she refused to give up. Forty years later she is miraculously still alive and enjoying life. At the time, it would have been all too easy for her to have taken the decision to end it all.</p>	Not Answered		

Disagree	<p>I have many disabled colleagues who have begged me to oppose this bill. They believes that granting this 'choice' to die means that their choices are further diminished. They already feel undervalued by society and feel that this will further heighten the sense that they are an 'incurable' burden on others. There is the sad story of the Canadian Para-Olympic seeking help with a ramp only to be offered assisted dying.</p> <p>I also work with the elderly; many of whom do have terminal conditions. Some of them are quite upfront that they already feel that they are burden to family and those who care for them. Some of them feel that they would be under pressure to end their life early if the option was there. There are sadly already well-documented cases of the elderly being abused by both family and those who should have been caring for them.</p> <p>However the honourable the motivation of those putting forward this bill the experience of other countries that once the door is open that law change is inevitable. The experience of Canada is a very obvious example. Those with mental health illness may now seek assisted dying. I can think of people who would have sought this option whilst ill, but who now enjoy a happy and fulfilled life.</p> <p>My friends in the medical profession have asked me to oppose the bill, since they do not want a healing profession to take on this responsibility. They do not believe that safeguards against conscience will survive or work.</p> <p>The evidence relating to the honouring of the conscience of pharmacists suggests that they are right to be concerned. I know one pharmacist who has chosen to retire rather than follow new guidelines.</p> <p>We should help people to value their life and to invest in the best palliative care we can. Rather than hiding death away we would do better if we confronted the reality of it, as a whole community, by caring for those</p>	Not Answered	<p>I fear that assisted dying is going to be cheaper than providing good medical care to the grave and that economics, rather than pastoral care, will unintentionally come to rule. The health service is already under strain on the Isle of Man and I have friends with sad stories of staff doing their best with inadequate resources.</p> <p>Hard cases move us all, but tend to make bad laws. The law as it stands is an important safeguard and changing it will have a significant implication well beyond these hard cases.</p> <p>We have been through a difficult period when the Isle of Man has striven to protect the population from Covid. Tynwald clearly wanted to protect life, which suggests that there was some sense that it was a gift to cherish. Ending life artificially does not promote this belief that every life matters.</p>
Disagree		Not Answered	
Agree	<p>When a person has an untreatable condition leading to certain death, or when a person is terminally ill and has only months left to live, it is cruel and inhuman to force them to endure physical and mental pain to the end of their natural life.</p> <p>Why refuse them the right to choose an assisted, civilised and kind death, provided no pressure is put upon them to make such a choice?</p>	For over 1 year	<p>In my view, a health care professional should collect the medication, take it personally to the patient and stay with the patient when the medication is administered.</p> <p>The care professional must not leave the medication with the patient, should the patient change his mind at the last moment.</p>
Disagree	<p>This is a dangerous step in the wrong direction leaving far too many questions. It also gives unscrupulous people the opportunity to bend the rules.</p> <p>I ask that this bill is not approved.</p>	Not Answered	
Disagree	<p>I strongly disagree with this proposed bill. It gives the opportunity for the unscrupulous and thoughtless to abuse the vulnerable. Pressure will be placed on older family members to agree to their own deaths. Totally wrong!!</p>	Not Answered	
Disagree	<p>It is ok for some people. But, I don't think it should be a law. It will be a slippery slope however assurance you give me.</p>	Not Answered	<p>Other countries who went down this road, prove that it is difficult to keep this law safe. Vulnerable people will be killed for whatever reasons.</p>

Disagree	True compassion for those who are terminally ill means ensuring the availability of high quality palliative care - assisted suicide will reduce the research and funds put into developing better palliative care. Many medical professionals and leading disability rights groups in the UK on the front line helping people (including Scope and Not Dead Yet) are opposed to changing the law. Doctors involved in caring for terminally ill patients and the elderly do not want assisted suicide legalised. On the mainland, the Royal College of GPs, the Association for Palliative Medicine of Great Britain and Ireland and the British Geriatrics Society are all against it. This is a massive weigh of experience that we should not ignore or override.	Not Answered	
Disagree	I don't like it. It is not for me. I don't agree with the proposal. Please STOP!	Not Answered	<p>The survey is a waste of time and resource. There are many important and urgent matters affecting many people. Why don't you discuss and do something about it?</p> <p>Like the following Manx care. More nurses. Promenade Support homeless</p>
Disagree	As a Christian and a practising Roman Catholic I most strongly oppose legalising assisted suicide. Life is a gift to be nourished and preserved until its natural death. To refer to assisted suicide as "assisted dying" is purely euphemistic and a watering-down of the reality. As human beings we share a common dignity, and as such we have a duty to care for the weakest and most vulnerable within our society. We should be united in our unequivocal support for these people. All people should be equally valued, especially the vulnerable and those approaching end of life. Pope Francis has indicated, that the dying need palliative care, not euthanasia or assisted suicide; and stresses that "We must accompany people towards death, but not provoke death or facilitate assisted suicide." Put simply, assisted suicide is an involvement in deliberate killing. No safeguards can be sufficiently adequate to protect vulnerable people from potential coercion and abuse. Law change is uncontrollable and open to manipulation, it always gets stretched! Consider how the law might be extended (as in Canada's euthanasia law, from the terminally ill through varying degrees of illness and disability, to the mentally ill). In reality it is extremely difficult to envisage how any assisted suicide law can ever be satisfactorily formulated, implemented and overseen. Such legislation would have the effect of "normalising" suicide. This is somewhat ironic given that a number of our Island agencies actively seek to promote the message that life is valuable, and work extremely hard to prevent suicide within our society. Legalising assisted suicide sends out the completely wrong message, one with the potential to have damaging effects upon those with suicidal tendencies. Palliative care here on the IOM is of an extremely high standard, and one that is greatly valued and held in the highest esteem. The thought of potential investment in assisted suicide is, to say the least, unsavoury! A	Not Answered	<p>I have made my position very clear in the answer to Question 8. Aside from the questions actually requiring answers, I have chosen not to answer any others. Several of the questions are worded so that any answer implies some support for the principle in question. I profoundly disagree with any process to provide Assisted Suicide (euphemistically referred to "Assisted Dying") within the Isle of Man. I will not help those who advocate assisted suicide give their proposals the false appearance of safety.</p> <p>I have many worries about these proposals becoming enshrined in legislation.</p> <p>To reiterate my concerns expressed in Q.8 I would add the following: The situation is open to coercion and abuse by others (e.g. financial pressures brought to bear can be very hard to detect). A feeling of having become "burdensome" to family, friends and caregivers may become overwhelming. If the choice to die exists, then a vulnerable person may feel that this becomes almost obligatory upon them. I disagree with any assessment of life expectancy. Quoting a period of six months is simplistic - the body may not be yet ready to die! It is very difficult to accurately predict the duration of a so called "terminal" illness. How can one know how long a patient may live, or be effected by treatment? The period preceding 'natural' death can be valuable to family and friends and may effect reconciliation within restrained relationships.</p> <p>Research indicates that in countries permitting assisted suicide, the safeguards become gradually eroded. What is permitted within the law becomes "stretched and stretched!" Canada is a case in point, extending from those who are terminally ill to those with mental</p>

Disagree	<p>The reasons are:</p> <p>It is a fringe interest</p> <p>Not a mainstream issue</p> <p>It cannot be safely implemented</p> <p>You should as a govt do better things than distracting yourself and the public with this</p>	Not Answered		The survey is biased towards assisted dying.
Disagree	<p>As a retired Doctor I cared for many of my patients over a 30 year period during their end of life care. I would have found it impossible to advise my patients as to a time frame to their death but with the support of my colleagues in the community Primary Care team I felt able to offer them continuity of palliative care. Some were supported in their own home and some moving for their final hours to Hospice.</p> <p>I feel it is a better way forward to improve the Community Nursing and Hospice staff provision to provide the best possible Palliative Care rather than assisted dying.</p> <p>It puts an enormous pressure on the Doctor providing the end of life care if relatives request the end of life be expedited and I firmly believe would have had a very negative effect on the Doctor - Patient relationship and level of trust.</p>	Not Answered		Questions left blank do not make sense if one opposes assisted dying
Disagree	<p>In my life, I have seen so many well-meant laws and safeguards FAIL.</p> <p>Some the worst cases was mass "euthanasia" in Germany 1933 - 1945. This was state organized mass genocide, first called "Euthanasia", later the "Endlösung" (= "final solution").</p> <p>Not only the jews were impacted - as still many people here are believing today.</p> <p>It started with</p> <ul style="list-style-type: none">- the "mentally ill",and- all other other "vulnerable" people (just as being discussed here as target groups, allegedly for their own good). Then came- the political enemies of the Nazi government,and- last, not least culminated with the jews who have unfortunately not been able to get out of Germany until 1938 who got gased in the Nazi gas chambers (Auschwitz, Maidanek, etc.) from 1943/1944. <p>In total more than mil 7 people.</p> <p>To be honest, even in "normal" times such as at present, there has always been a considerable number of doctors and/or consultants and/or nurses who were absolutely criminal themselves and killed patients, above all babies or OAPs, for "fun" to satisfy their queer/sick desires and phantasies (e.g. Harold Shipman, Daniel Urbani, Michael Swango).</p>	Not Answered	<p>all question from #9 to #27 are biased and answering these logically implies a YES to assisted dying. Such tactics should be under the dignity and professionalism of any government.</p>	<p>This consultation is an example how it should never be.</p> <p>It is obviously so biased to harvest public support FOR the "Assisted Dying" Bill - the outcome intended by Dr Allinson being author and initiator of the corresponding Bill.</p>
Disagree	<p>I do Not agree with this proposal because it is totally not safe.</p> <p>Nothing makes me believe otherwise</p>	Not Answered		<p>Please don't give us false choice!</p> <p>Give us true health care!!</p>

Agree	<p>The best person to decide when a subject should be allowed to die is the well advised and competent subject or one who laid down the conditions before that competence had been diminished.</p> <p>In the following question the option of 'No' has been omitted. A subject may foresee personal motivators that are not of a medical nature (for instance a remorseful murderer).</p>	Other	<p>Compassion should be the driver not residency.</p>	<p>Re: 'Not Sures above': The issue of how and by whom 'the medication' is procured and administered is one which considers those in the supply chain and those in the business of disposal is complex and may not be a one of one size fits all.</p> <p>Other. The press tell us the medical profession are not entirely in favour. It need not in every case be any of their business although many have practised for good since time immemorial (the Brompton cocktail was never served at the Ritz).</p> <p>Certainly those demurring should be excused. perhaps we should even be wary of leaving giving their opinions so much weight in the first place. One very senior practitioner, the late Lord Dawson made clear he thought the matter was exclusively for the doctor and debated against allowing wider 'licence'. Had his late Majesty had the benefit of two opinions on the matter one of the 'less appropriate evening journals' might have have scooped with a royal obituary.</p>
Disagree	<p>This survey is totally misleading with completely one sided information by few clever and vocal people to hijack the silent majority who want to die naturally and peacefully in a comfortable setting whether it is hospital, hospice or home.</p> <p>It also whips the fear of unknown "unbearable" suffering with few odd examples.</p> <p>Just leave this matter be, and try to govern on the issues that really matter to the people!</p>	Not Answered		<p>This survey is totally misleading with completely one sided information by few clever and vocal people to hijack the silent majority who want to die naturally and peacefully in a comfortable setting whether it is hospital, hospice or home.</p> <p>It also whips the fear of unknown "unbearable" suffering with few odd examples.</p> <p>Just leave this matter be, and try to govern on the issues that really matter to the people!</p> <p>I did not want to answer any other questions as they could be construed inadvertently against my will.</p>
Disagree	<p>I think palliative care and the hospice provision on the lom is excellent. Pain should be managed and patients and families should be able to make the most of this precious time without feeling there is any urgency to terminate life.</p>	Not Answered		<p>The survey questions are skewed so that however these questions are answered it appears that I'm agreeing to assisted dying when I am utterly opposed to it.</p>

Disagree	<p>"On the Isle of Man 65% of respondents strongly support the introduction of such legislation whilst 8% strongly oppose it.</p> <p>On further questioning 48% of people, when asked, believed it of high importance that a law change was debated during this political term."</p> <p>How on earth, this quote in the introduction of the survey, will lead to an open and unbiased debate on this matter? You are influencing the survey even before it is started!</p> <p>This is shamelessly one sided presentation on the proposal. The questions, OMG, are all assuming that I agree with the proposal. I don't!!</p> <p>Get a grip and stop this non-sense, PLEASE!</p>	Not Answered	THIS IS 100% BAD FOR THE ISLAND! FOCUS ON HEALTHCARE, NOT DEATH CARE!!
Disagree	Assisted dying should not be permitted for ANY HUMAN BEING AT ALL.	Not Answered	Assisted dying should not be allowed for ANY ONE in the Isle of Man
Disagree	<p>Harming the Vulnerable.</p> <p>=====</p> <p>I hope you will not bring in assisted suicide or euthanasia.</p> <p>Consent defences to criminal offences are always messy. They depend on the acting ability of the accused. But, where the victim is dead, they are unworkable. And assisted suicide and euthanasia are effectively consent defences to murder.</p> <p>I understand that the Royal College of GPs is against euthanasia and against assisted suicide.</p> <p>Eligibility criteria.</p> <p>=====</p> <p>The right to die would, in reality, become a duty to die.</p> <p>Conscientious objection.</p> <p>=====</p> <p>It would be disturbing if personnel who wish to help patients were precisely those who had to leave professions because of a lack of permission to refuse to kill.</p> <p>In practice, any private contractor (such as a general practitioner) will be at grave risk of being forced out of business, if he or she refuses to carry out euthanasia or assisted suicide. That is a reason against legalising the practice. Nonetheless, conscientious objection would be better than nothing.</p>	Not Answered	

Disagree	<p>From the experience of other countries which have legalised assisted dying(AD) all evidence shows that the law is uncontrollable. One only has to look at Canada's euthanasia law: initially it was only for the terminally ill: then the chronically ill and disabled: then those who are mentally ill! proving that the law is uncontrollable.</p> <p>Such laws legalising AD are unethical e.g. leading to loss of trust in doctor - patient relationships: stepping over the line of "First do no harm" Bearing in mind the moral, ethical and practical burden put healthcare professionals. AD legislation is totally unnecessary: there is "world leading palliative care available to all" which should be offered to all patients in need as compassionate response - sadly, too many people have inadequate access because it is not offered to very ill and dying patients as a compassionate step to pain relief and care.</p>	Not Answered	<p>I have deliberately not answered some of the above questions because any answer implies my support for the principle of permitting assisted dying on the Isle of Man of which I am totally against.</p> <p>Given the openness of proponents of this bill, as demonstrated in Q10, to euthanasia & assisted suicide for broader categories of people, it is important to remember the significance of dementia as a terminal illness.</p> <p>In my experience, visiting elderly neighbours who are ill in hospital, many have voiced their fears of 'being killed through drug overdose by a doctor in order to free up their bed for someone else'; or are made to feel a burden on the healthcare system.</p> <p>One lady feared that her greedy son in law was trying to gain access to her money, by coercing her to ask for assisted suicide "to end her misery" when she wasn't in misery!</p> <p>From the experience of other countries which have legalised assisted dying(AD) all evidence shows that the law is uncontrollable. One only has to look at Canada's euthanasia law: initially it was only for the terminally ill: then for the chronically ill and disabled: then for those who are mentally ill! proving that the law is uncontrollable!!</p> <p>Such laws legalising AD are unethical e.g. leading to loss of trust in doctor - patient relationships: stepping over the line of "First do no harm" Bearing in mind the moral, ethical and practical burden put healthcare professionals</p> <p>AD legislation is totally unnecessary: there is "world leading palliative care available to all" which should be offered to all patients in need as compassionate response - sadly, too many of whom have inadequate</p>
Agree	<p>I believe that anyone should have the right to end his or her life as he chooses. This is entirely compatible with my Christian belief in God.</p>	For over 1 year	
Disagree	<p>From personal experience the diagnosis of someone with less than 6 months to live is not always accurate.</p> <p>This is open to misuse and abuse and coercive pressures and emotional pressures on the ill person. e.g. strong feelings of " Being a burden" on loved ones and society both emotionally , financially. I meet many elderly who do not want to be a drain on their families.</p> <p>Although the safeguard of 2 doctors is mentioned...would the person continue asking doctors until they found 2 who agreed with them. Also in time will doctors feel under pressure to agree?</p> <p>Also what studies have been done with regard to the fall out of these decisions on doctors and families after the event?</p> <p>Finally I do not feel confident that if passed this Bill will not gradually be extended without the people having a say.</p>	For over 5 years	<p>The Government needs to give greater financial support in the area of Palliative care and Mental Health Care, and to the many " Family Carers" on the Isle of Man before considering this proposed Bill.</p> <p>Greater Independent Studies need to be done and reviewed on the outcomes of such laws in other countries.</p>

Disagree	<p>Instead of providing vulnerable individuals with less protection and devaluing human life, we should be increasing the palliative care that we have in the UK. More and better access to palliative care is essential for those who are suffering. I appreciate that such care is not cheap and should such a bill go through to legalise euthanasia I fear it would reduce the financial support in these existing areas. Just as in social care, which has been undervalued by successive governments, we are now reaping the costs of this with valuable bed blocking in our hospitals and the costs to life and the tax payer. This country seems able to find huge sums of money to do research on medical treatments for existing life limiting illnesses, but what about the individuals on going care and learning to live with these illnesses, where is the financial support for this?</p> <p>We have what appears to be an ever increasing problem with poor mental health exacerbated by the covid pandemic. We see campaigns on the tv trying to prevent suicide in people who have lost hope, so surely this bill is running in the face of these efforts. Vulnerable people, ie those in pain, those with mental health issues, those without necessary support, may see this as an opportunity that is easy and quick and could at their low point be tempted to take a route that is not in their best interests.</p> <p>I also wonder who is going to fulfil the act of euthanasia and assisted suicide? Is this going to be put in the laps of healthcare professionals whose job it is to preserve life. Surely this places them in a compromising situation, two individuals with the same healthcare issues, but now two options, to end their life or to extend it? Where is the line drawn to protect the healthcare professional and what advice are they to give families. How</p>	Not Answered	As per my previous answers I do not support assisted dying and have not responded to any of the questions which assume that I accept it.
Disagree	<p>I feel resources should be used to help people to live as pain free as possible rather than assisting or accelerating their deaths. My mother has advanced cancer and dementia. This is very difficult for both her and me, but I want to make the last few months of her life count and be as pleasant a possible.</p>	For over 5 years	
Disagree	<p>As a former nurse I am aware that there is a difference between those who have reached the end of life and those who may have been given a prognosis of a terminal illness.</p> <p>A terminal illness may mean that someone is able to continue to have a fairly active and productive life for some years before they reach the need for end of life care.</p> <p>If this were available older people may opt for this so as not to be a burden on family. There are just too many grey areas and in the end I believe it is wrong for anyone to take someone else's life.</p>	Not Answered	<p>I have been unable to answer from question 9 onwards as these questions assume some sort of support for the Bill which I cannot do.</p>

Disagree	<p>There are so many reasons why manslaughter should not be legal.</p> <p>Family who are keen to inherit and not at all keen to provide the love and care to a dying family member would be tempted in a time of stress to pressurise the dying individual into taking their life when the shock and pain of suffering makes them act out of guilt to those who are supposed to be caring for them.</p> <p>this opens a way for someone to manipulate an end of life decision when the sick person is at their most weak.</p> <p>Allowing others to manipulate a situation where they can take a life is, like abortion, a way of normalising the taking of life which is God's to give and to take.</p> <p>There are cases where Doctors like Shipman and other medical professionals have decided they have the right to take life and clearly wickedly enjoyed doing so - this opens the door to such evil people.</p>	Not Answered	<p>As someone opposed strongly to assisted dying I must point out that this questionnaire is not fit for purpose. I cannot believe whoever wrote this was allowed to publish it without anyone with a higher IQ allowed to review it for its suitability! This is the most appallingly constructed and bias set of questions that could be used to manipulate a response where any answer to questions 9,12-15 and 17-26 can't be answered without inferring some kind of acceptance that assisted dying is an option, when trying to answer that nothing is acceptable.</p> <p>Surely the government needs a legal opinion to ensure a questionnaire can be relied upon. this surely cant survive a challenge by a unbiased judge.</p> <p>This is appalling legislation and we should ensure that anyone legislating to allow the taking anothers life is locked away to protect the rest of society.</p>
Agree	<p>My opinion is that a sane individual should be allowed to depart life at a time of their own choosing.</p>	Not Answered	<p>We do not choose to be a living person. We are a consequent of other other individuals action. We should not be forced to stay alive to conform to social or political or medical artificial rules.</p>
Disagree	<p>We don't have the right to take life.</p>	Not Answered	
Disagree	<p>I have seen people told by relatives to die just because they need the property and money. I have also heard people say they want to live regardless of their terrible pain and condition.</p>	For over 5 years	
Disagree	<p>Do I have to explain the reasons?</p> <p>It is simply my considered position!</p>	Not Answered	<p>You are running away with questions.</p> <p>The method makes me wonder if you really care about the outcome of the consultation. I worry that it is a smokescreen and you would proceed to write and present the bill regardless of the outcome of the consultation.</p>

Disagree	<p>There will be “mission creep”. This is already happening in other countries where these practices have been only recently introduced. The “limitations” on age or likely outcome of an illness etc will in the near future be changed to allow more people to die. No doubt it will start as rare exceptions and finally like abortions it will become routine. People will be killed who indeed requested it and then changed their mind. I read a horrific account from the Netherlands where the person did do just that but was held down by family members so that the injection or whatever it was could be administered. Frail, vulnerable people will either come under pressure from family or feel they are under pressure or feel obliged on principle to end their lives to “avoid being a burden”. There won’t be a way for the “system administrator” to spot this happening. The very fact that it becomes possible degrades the value of human life. The medics are not in fact able to accurately say how terminally ill a person is. I am reminded that the “Lockerbie bomber” was freed to go to Libya by the Scottish government with a life expectancy of 3 months. He lived 3 years. It is hard to imagine anyone over whom more care might be taken by more senior medical and judicial figures to establish a life expectancy and they were out by an order of magnitude. There is a better way. Advances in understanding and managing pain and palliative care and treating illnesses happen all the time.</p>	Other	<p>I don't believe that assisted dying should take place on the Isle of Man or anywhere else.</p>	<p>Being involved in the process must inevitably affect the personalities of those involved. One simply cannot break the VIth commandment and carry on as if nothing had happened, human beings are not compartmentally constructed like that. It will affect the quality of care and compassion extended to everyone else that the doctors concerned are involved with.</p>
Agree	<p>Terminally Ill people should have the choice to ease their pain and suffering when they want to and be able to farewell their loved ones on their time.</p>	For over 5 years		

Disagree	<p>I broadly agree with the present law on this issue</p> <p>Some of my reasons for opposing changes in the law regarding assisted dying:</p> <p>A] REASONS PATIENTS GIVE FOR CHOOSING ASSISTED DYING.</p> <p>Research shows that only 32.7% of people in the 2020 data summary for the Oregon Death with Dignity Act gave "Inadequate pain control, or concern about it "as a reason for assisted suicide ".</p> <p>The top 5 reasons which Oregon doctors report for issuing lethal prescriptions are:</p> <p>1. loss of autonomy 91%</p> <p>2. less able to engage in activities 86%</p> <p>3. loss of dignity 81%</p> <p>4. loss of control of bodily functions 50 %</p> <p>5. feelings of being a burden 40%</p> <p>Terminally ill people often become disabled and can be subject to undue influence, subtle pressure and coercion to see their lives as less valuable than more able people.</p> <p>B] SAFEGUARDS</p> <p>Although many areas legalising assisted dying originally included safeguards, such safeguards are gradually being reduced in areas which permit assisted dying. eg</p> <p>i] disabled infants and dementia patients are being euthanized in Belgium and the Netherlands.</p>	Not Answered	<p>In addition to the reasons I have outlined in answer to Question 8 I would like to say:</p> <p>a] I believe that pharmacists have the right to freedom of conscience in the moral/ethical matter -- they should be permitted to refuse to be involved IN ANY WAY with assisted dying.</p> <p>b] I consider that to have lethal unregulated doses of drugs in a person's home or being moved about in the community is dangerous and an unacceptable safety risk to others</p> <p>c] there is the matter of the patient possibly becoming hesitant about proceeding with the assisted dying ----- what should happen to the drugs if this happens -- should the patient keep the drugs in case he/she decides to proceed later -- or should the whole procedure be initiated again from the beginning?</p> <p>d] I disagree completely with assisted dying, but if it is to be legislated for, then I would say that the whole process should be open to scrutiny with regard to any reviews or reports eg cause of death should include administering of lethal drugs, not simply be listed as the presenting illness which led to the choice of assisted suicide.</p> <p>e] I believe that all patients requesting assisted dying should be referred to a psychiatrist for capacity assessment.</p>
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Disagree	<p>Encouraging or assisting someone to commit suicide is murder and undermines the sanctity of life. In other countries that have legalised assisted suicide this has led to many vulnerable people taking this option because they feel they are a burden, and the eligibility criteria have widened over time. Leading disability groups are opposed to legalising assisted suicide because they understand the value of life. In recent years, much work has rightly been done to help prevent suicide, which would be hindered by the contradictory message of legalising assisted suicide. A much better use of time and resources would be further investment in palliative care.</p> <p>The eligibility criteria proposed are highly subjective and will inevitably be expanded over time.</p> <p>In other countries where assisted suicide has been legalised, the eligibility criteria have been widened over time, often in spite of assurances that they would not be. Those who meet the criteria may quickly feel that they have an obligation to accept assisted suicide.</p> <p>It is very hard to ensure informed consent for a complex issue like assisted suicide.</p> <p>Ensuring that people are not being coerced into assisted suicide is hard to achieve. Understandably people suffering from a terminal illness often have feelings that change massively in a short period of time; they might experience a particular low point when they feel like they want to die, but would later feel glad that they are still alive. Protections need to be in place</p>	Not Answered		
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Agree	Everyone with a incurable condition tat results in a poor quality of life should have the right to say when they are ready rather then waiting for their body to give up.	Not Answered	<p>At the end of my uncles life he spent 2 weeks in Nobles hospital having tests and during that time he degraded rapidly and was in a lot of pain and discomfort before the Doctor finally told him it was cancer (they had told the family it was cancer and likely terminal over a week earlier) and said that he was welcome to try the treatments but with his advanced age and level of condition it was unlikely to work and would certainly increase his suffering. My Uncle had expected as much and said to give him a day to say goodbye to everyone and get everything in order then to give him "whatever pill I need so I can just pop off" because he already had plenty of time to come to terms with his situation and didn't need another 14 days. The doctor was obviously not able to do this as so he spent another week in Nobles before a space came up in Hospice. My Uncle was very grateful for the move to Hospice as he found the level of care he received and the strength of the medication given to be much higher making him more comfortable in his final weeks. It is my belief that the service provided by Hospice is essential and needs more funding from Government but we also need to allow people to choose when the time and place is right for them. I believe that we should allow others from outside the island to come to enjoy the end of their time here in the knowledge the they can say when they are ready which could be several weeks or months after assessment with out the risk of any loved one being prosecuted for helping them in their final moments.</p>
Disagree	This is an extremely complex issue but I believe that Life is something that should be celebrated and not terminated prematurely. This bill is likely to change the culture on the Island, even with safeguards in place to somewhere that no longer supports and cares for our most vulnerable in society.	Not Answered	<p>This questionnaire is worded in such a way that the questions imply that you already agree with assisted dying. This is more about the looking at how it could be implemented rather than whether this is something we actually want. Assisted Dying is not a solution to lifes challenges and we should be looking at improving the care and provision for our most vulnerable rather than making them feel like a burden on society that should be removed.</p>

Disagree	<p>1. i am registered as 'severely sight impaired' and have deteriorating eye sight. I can think ahead to a few years' time when I won't be able to see anything at all and will be absolutely dependent upon my family and others. The care that I will need will cause a lot of financial pressure on myself, my husband and children. To reduce the cost, the family will do what they can to help. But I'm fearful that as I get older, I will feel that i'm a burden and my lack of any independence will make me worry about the effect that I'm having on limiting the freedom and financial security of my children. If the Assisted Dying law comes into force, the unknown but real potential for me to want to reduce this pressure on others may increase in my mind particularly when I become more vulnerable, house bound and potentially a bit depressed. I could make the wrong decision too easily. One can't exclude the possibility of pressure being subtly placed upon me to go down the route of shortening my life in order to increase the freedom of my family.</p> <p>2. I understand that in countries where Assisted Dying has become law, this starts a series of 'softening' of the rules, widening access. It becomes uncontrollable and there is no going back - only forwards towards to looser criteria for approval for assisted dying. I have Canadian friends who are very scared by this - where the criteria for assisted dying was initially terminal illness but has widened and widened to include chronic illness and mental illness. I would be really concerned that if I got dementia for example, that my life would be taken without my consent if I was in Canada and perhaps this could become a possibility in the Isle of Man in due course.</p> <p>3. I feel that assisted dying is unethical. The medical profession will be put under huge pressure. the relationship between patients and doctors will become strained, trust will be lost and people will become afraid and less</p>	Other	30 years	<p>1. All applicants for Assisted Dying should be referred to a consultant Psychiatrist in order to ensure that their decision isn't being made due to their poor mental health. Poorly managed depression and the side effects of many medications are common causes of mental health issues, especially in the elderly. Poor mental health needs to be excluded by a Psychiatrist for all applicants before any further action / steps can be taken regarding an application for AD.</p> <p>2. Patients or their carers should not be allowed to collect medicines for Assistend Suicide from pharmacies. These lethal medicines may not reach the required destination. Their presence in the community needs to be monitored.</p> <p>3. Medicines for Assisted Suicide should not be allowed to be stored in people's homes. They are dangerous and potentially misused / inadvertently used by others.</p> <p>4. Advocates must not be allowed to leave the details of review procedures and the intended contents of annual reports to later regulations: the plans must be open to scrutiny before any further legislative steps are taken</p> <p>5. The provision of assisted suicide should not be allowed to be included in a 'living will' We need to be reminded that dementia is a terminal illness.</p> <p>6. I have seen great care and comfort provided to close friends during the last year(s) of their lives - received from wonderful Palliative Care services. They have been able to communicate and share their last days with their families and friends with a minimal of pain and suffering. This has brought great comfort to them and to their families. We need to support and strengthen Palliative care services</p>
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Disagree	<p>I object to the proposal in principle because of three main factors which I think would influence any legislation which would be passed by the Tynwald:</p> <p>Uncontrollable (sometimes knows as the 'slippery slope' argument)</p> <p>In Canada, at the start, only terminally ill patients whose death was “reasonably foreseeable” were eligible for MAID.</p> <p>Then, chronically ill and disabled patients were included.</p> <p>Now, people with a mental illness deemed to be “intolerable” are set to access MAID, though these plans have been put on hold by the Canadian Government in order to allow doctors to be better prepared to implement it after a recent public outcry.</p> <p>·Unethical Doctors’ and nurses’ conscience rights (and even those of ancillary staff and contract workers) are eroded and harm is done to the doctor-patient relationship</p> <p>· Unnecessary Many people who request assisted suicide/euthanasia don’t want to die, rather they don’t feel they have any other options.</p> <p>The answer is quality palliative care and effective social support, access to which for too many is inadequate.</p>	Not Answered	<p>On the subject of the limited life expectancy of any applicant for euthanasia or assisted suicide, even six months would be too unreliable a prognosis. Predicting life expectancy is notoriously difficult, as repeated studies have shown. Oregon regularly sees patients who have been confirmed as likely to die within six months far outliving that (even by several years) before taking the lethal drugs.</p> <p>I would also like to reinforce concerns over the arbitrary nature of the criterion of “unbearable suffering”. It is an entirely subjective term and with patients of course free to refuse treatment, this would cover a vast range of chronic conditions, disabilities and even potentially mental illnesses. Any and all applicants should undergo a psychiatric referral for a further capacity assessment.</p> <p>All proposals brought forward pay lip service to rights of conscience, but Canada and Belgium (in particular) have seen doctors required to make “effective referrals” (to doctors willing to process E&AS requests), judges opining that doctors should consider leaving their professions if they don’t want any contact with the practice, institutions being forced to allow E&AS on their premises, those which refuse losing funding and increasingly, pressure being placed on doctors to raise the “option” in consultations.</p> <p>Allowing lethal unregulated doses of drugs to circulate in the community unmonitored and without being certain of the destination would be dangerous. Further questions arise over conscience rights</p> <p>I think that, like organ donation, an individual should be able to record their views on the topic as part of their estate planning. With the opportunity to review and change what they have placed on record over their lifetime, as with a will, it would to some extent confirm consistency or a track record of the individual's wishes.</p>
Agree	<p>Quality of life is important and no-one likes to be a burden on others, particularly their nearest and dearest. My father died with a brain tumour. My mother, a retired nurse provided care at home until the end which is what he wanted. He didn't want to be institutionalised and they had limited finances and no access to the NHS. But I witnessed how strained things were towards the end. She was mean to him and he was entirely dependent on her.</p>	For over 5 years	
Disagree	<p>Health system needs improvement</p> <p>Legal system is not good enough</p> <p>Political motivation is suspicious</p> <p>This is not the concern of the weak and vulnerable</p>	Not Answered	
Disagree	<p>I read all the information in the last few weeks</p> <p>I believe I should change my mind and oppose the proposal to legalise assisted dying</p> <p>Please Dr Alison can you change your mind?</p>	Not Answered	<p>Survey is biased as the questions are presumptive</p>
Disagree	<p>I want to be supported to live when dying and terminally ill</p> <p>I don’t want to be killed by anyone</p>	Not Answered	<p>Rose is rose whatever name you call it</p> <p>Murder is murder whatever name you call it</p> <p>Please stop killing old and vulnerable</p>
Agree	<p>I don't think people should have to suffer long drawn out and painful illnesses.</p>	Not Answered	

Disagree	<p>Assisted dying is neither safe nor effective.</p> <ul style="list-style-type: none">• Allowing assisted suicide is extremely dangerous for the most vulnerable in society, putting people under pressure for fear of being a financial, emotional or care burden to others, notwithstanding placing some in the power of coercive and abusive relatives.• It is a counsel of despair, when better investment in palliative care leads to happier outcomes, fewer deaths (legalised euthanasia and assisted suicide hugely increases the number of deaths), enhances society by placing supreme value on human life.• It is seen in all jurisdictions allowing this practice that goalposts move, enabling more and more groups of people who “want” to die to do so, even now leading to clamours for infanticide for disabled babies up to the age of one year (Canada).• People may at first subjectively declare their condition unbearable but then change their minds after coming to terms with a diagnosis (Ireland).• Doctors become agents of death and the doctor-patient relationship is muddled.• It leads to pressure on care home staff, clinics, even hospices, to compromise their consciences and to comply in this practice.• Deaths can be long and drawn out and intolerable agony experienced like some US prisoners who have had lethal injections.• It will undermine good work done in suicide prevention campaigns.• It breaches the sixth commandment, given to ALL mankind for our good, whether we believe in the Giver or not.	Not Answered	
Disagree	<p>Look around the world, we don’t want assisted dying on our soil. It is just murder.</p> <p>I don’t want my family or authorities kill me in whatever form when I am poorly and get away from murder.</p>	Not Answered	<p>Assisted dying is nothing more than assisted murder!</p> <p>You shouldn’t really run a survey to know murder must not be legal in any circumstances.</p>
Disagree	<p>"some people experience severe emotional and physical suffering at the end of life despite receiving excellent palliative care"</p> <p>This was a quote from the introduction to the survey. It shows that this is a bill to please "some" people. Many are bought in to this scam with words like choice, autonomy and freedom. This is not problem affecting the majority of people. There is absolutely no need to change the law on killing. The "some" who are affected can seek help within existing law and can choose to refuse treatment and be comfortable till death.</p> <p>I oppose this proposal in all forms and in total.</p>	Not Answered	<p>I chose not to answer all the other questions as they are totally misleading the survey, intentionally or otherwise. The main point is "I disagree with this proposal" Please vote it down, or even better please don't bring it to HK.</p>

Disagree	<p>I don't want to presume my death will be terrible. I am not afraid of death. I hope to die in peace in my own time. I do not want force death upon myself fearing for the unknown.</p> <p>I say a BIG NO to the proposal.</p>	Not Answered	<p>I dread to think what this change will bring to the island. Death tourism?</p> <p>The information from the proposal is patchy and one sided.</p> <p>I hope that the survey shows majority of people oppose assisted dying. I hope that you share the survey in full to the press and all the MHKs.</p> <p>Apologies. I do not agree with the proposal and hence have not answered the other queries as they are cantered around defining and refining the process.</p>
Disagree	<p>1. This will mostly impact the less fortunate members of the society, who have limited financial and intellectual resources i.e., members of the society who do not know or have the will to pursue various support avenues offered by the government but rather accept the easy option of assisted dying.</p> <p>2. The greatest fulfilment in life comes from service to a fellow human being and that is why here in the Isle of Man we have so many impactful charity organisations with lots of selfless people dedicating their time and resources. I fear that a bill like this will make us cold hearted to pursue selfish interests of pleasure.</p> <p>3. Members of the medical fraternity (Doctors, nurses, care workers), who always use their years of learning, knowledge and experience to solve problems will now offer this easy and simple solution to improve hospital metrics (wait times, no of cases seen etc)</p> <p>4. We have seen that safeguards (rules) always have loopholes left to be exploited, abused and that's the reason we still hear tax avoidance, money laundering news in this day and age.</p> <p>5. I have personal experiences where my cousin at 60, who a couple of year ago was in death bed, written-off by the doctors, fought his way through medication, community support and will-power, now lives a happy life with his wife, children and grandchildren. My father, a lawyer, who was diagnosed with stage 4 cancer at 81, while presented with treatment, accepted mortality as a fact of life, refused harsh treatment, peacefully passed away in a couple of months after diagnosis with his family and friends around him.</p>	Not Answered	
Disagree	<p>Assisted dying is not the need of 99% of the population.</p> <p>Why must we legalise this?</p> <p>Legalising killing will send wrong signals to many people in vulnerable situations to seek death over life!</p> <p>We all know life can be unbearable at times!</p> <p>Stop this immediately and do something useful with your time in Tynwald Allinson.</p>	Not Answered	<p>I appeal to your good conscience Dr Allison to withdraw this proposal even going to Tynwald any further.</p> <p>You can be obsessed with matters that affect majority of the people!</p> <p>How lovely it will be if politicians care about what truly affects people and do something about it!</p>

Disagree	<p>As a healthcare professional I’m concerned about the a change in law for a number of reasons.</p> <p>Firstly I believe a change in law would be unethical. It has the potential to harm patient-doctor relationships, putting them in very difficult scenarios such as deciding how long someone has left to live, weighing up potential coercion. I’m concerned also that the question on conscientious objection is being asked, I believe in any law this should already be a given. I would highlight that over 50 doctors in the Isle of Man have already come out against this. There are very few publically speaking for a change in law the main one being the proposer of the bill.</p> <p>Secondly I regard the bill as unnecessary as palliative care is available in the Isle of Man which can give those who are dying great comfort in their final moments. The UK are world leaders in palliative care and I worry that a change in law in the Isle of Man would mean access to palliative care is reduced. Furthermore incurrent methods are not always successful and can cause more suffering.</p> <p>Finally I am opposed to a change in law as in other countries where the law has been changed this has resulted in further even more concerning changes and cases. For example in Canada the expansion from terminally ill to mentally ill in March 2023 is extremely concerning and will lead to premature deaths. Before this expansion in law in Canada 3.3%of deaths in the year 2021 were as a result of euthanasia. This is extremely concerning for me and would be deeply concerned if the Isle of Man was to head down a similar trajectory.</p>	Other	149 years	<p>As a registered pharmacist I am concerned that there is I’m concerned about a number of these questions.</p> <p>Q22: conscientious objection for pharmacists is also an important consideration which needs to be taken into account in any bill</p> <p>Q23: this proposal is entirely inappropriate and could potentially mean a patient chooses to make a decision based on mood changes, it could leave relatives in really distressing situations. It is also wrong as it is totally unsafe to keep medications in a home which when taken could end someone’s life. If these were taken inadvertently this could prove to be a fatal inclusion in the proposed bill.</p>
Disagree	<p>We simply do not need it.</p> <p>If someone is so desperate to kill themselves there are ways existing to do so. For those handful of people, many vulnerable people must not suffer. It is unethical and immoral.</p> <p>STOP!!</p>	Not Answered		<p>None of questions add meaning once I said I disagree. I shouldn’t be asked any more questions. The survey must have ended.</p> <p>Poorly designed</p> <p>Totally one sided</p> <p>Waste of public money</p>
Agree		Not Answered		
Disagree	<p>Life is precious, you can NEVER know the true ending to your life. I know countless people who thought they were ready to die but persisted and had truly happy ends to their lives. Happiness they couldn’t know of beforehand.</p> <p>Life is something that should never be taken for granted.</p> <p>Our island economy does not need to be based on life and death. There is so much more that we can benefit without becoming a place people come to die.</p> <p>Put the money for this to hospice. It’s there and good. There is no need to end life in pain, hospice can and does work.</p>	Not Answered		

Disagree	The island does not need a death bill. We need best island healthcare too many risks, too little benefits, too few people	Not Answered		Fringe ideas should not be enshrined in law. MHKs are busy governing the island, and should not be distracted with ideas like this affecting handful of people a year.
Disagree	One man, just like his mother or father, did not choose to enter this world through his own power, so then, neither can you choose your ending. The innate ability of a mortal human does not allow him such powers by his very nature, to choose life or death.	Not Answered	Stop asking questions geared to assuming that the answered approves of assisted dying, where is the don't agree either way option. Nice ;)	This consultation is bias towards assisted dying, and does not question the comprehensive range of responses on the matter as a consultation should. Therefore this consultation can at best provide a false accuracy, and should be nullified and discontinued. Furthermore, if Alex Allinson is so desperate to see his name on a Wikipedia entry when his time has passed, there are much easier ways to go about it.
Disagree	I believe that if the law is changed the risk to vulnerable is adults is heighten and the risk to palliative care is also at risk.	Not Answered		
Disagree		Not Answered		
Disagree	For centuries our law has drawn a line that says it is wrong to take life. That law acts as protection. I'm concerned that allowing assisted dying would cross a line that should not be crossed, and once it is crossed the tight regulation being talked about could be chipped away at. * where assisted dying has been introduced in other jurisdictions the provision has been widened .. would we in the course of time see extensions down to 16 years old, or to those who are simply tired of living, or the introduction of euthanasia? * it is widely recognised that the medical profession cannot determine accurately that someone will die in 6 months time * the idea of intelligent articulate people with a terminal illness freely giving their consent is a very seductive one. I'm concerned about the pressures that individuals might feel to bring their lives to a close out of fear of being a burden, wanting to save their family money etc * I'm unclear what the life-ending package would contain. More detail would be helpful as rumours about hundreds of tablets abound	Not Answered		We are not being told at this stage how death will be brought about. Medical professionals should not be required to act against conscience.
Agree	If the person has no quality of live and is in pain or distress then they should with help be allowed to end their life.	Not Answered		Some of the questions are Yes or No . But every case is different and it deepens on the patient and what physical state they are in. But if their overriding wish is to end their life they should be assisted in doing so .
Disagree	I got family suffering from terminal diagnosis. But I do not want this proposal to become law. It is wrong to make law for so few people suffering in agony. what we need is top class care to look after people with unbearable pain and suffering.	Not Answered		It seems that cabinet office is distancing themselves from this shambolic survey reading from its clarification issued on 20 January! I urge MHKS to vote this down when the bill gets to the Keys.
Disagree	Because too many people need support & help not disposing of. That too many people need support & quality of life help instead. There are many examples of happy people who have enjoyed happy years after terminal diagnoses. This is way too much and we should be investing in the care not the disposal.	Other	Questions 12-14 are biased on the assumption I am in favour. There should be an option to say I disagree so not in favour of shy of those responses!	Questions 15-27 presume the response is favour! Outrageous. There should be an option to select no!!! I am fundamentally against this but the entire tenor of this consultation assumes an in favour mind from the outset. This is entirely wrong & biased.
Disagree		Not Answered		

Disagree	We are not God. We do not have power over life and death. It also seems far too easily open to abuse.	Other	It shouldn't be available at all	Well for starts I don't like this survey as you write it as through its already a given. This is not something we should introduce. I dunno if Allinson has a God complex or what but I don't think this is a good thing for us. Doctors are wonderful and should not take this as part of their duties.
Disagree	No, assisted dying must never be allowed in law to any group of people.	Not Answered		I feel that all the other questions are one sided with the assumption that we accept the proposal. Terribly biased survey!!
Disagree	There is insufficient room for all my objections, but it is open to abuse, intended and unintended. People wo are ill may well feel pressure to end their life for the sake of family finances, to relieve stress on carers or the health services. I am also concerned the Island and travel facilities (airports and sea terminals) could become the focus for high profile demonstrations, bringing unwanted adverse international media attention and, quite possibly, negative political reaction. I am also well aware that assisted deaths do not always go to plan and can be painful, traumatic and long drawn out. The trauma imposed on patients and relatives could well be more severe than natural death,	Not Answered		
Disagree		Other	I am totally against this, so 25 years minimum	I a totally against this for the sake of individuals, families, the health service and the good standing and reputation of the Isle of Man. If Tynwald agrees to progress this, against the opinions of the majority of Manx health professional, the safeguards should be very stringent and allow plenteous opportunity for changing minds. I believe there should be a requirement for investigations into family and social circumstances to ensure, as far as possible, that the patient is not under undue pressure, deliberate or otherwise, to end their life. There should be limits on those allowed to practice in this filed. The opportunity for private clinics to operate under less well controlled conditions simply for their own profit must be curtailed.
Disagree	Based on the evidence of how this type of legislation has affected the type and quality of healthcare, including palliative care, in other countries I am uncomfortable with the likely effects the Isle of Man will suffer. Additionally, from a practical point of view, the impact it would have on healthcare staff in such a small community in terms of mental health, spiritual well being, and social standing seems to have been ignored in much of the consultation.	Not Answered		Question 11 on this consultation is particularly poorly worded, given the seriousness of the subject matter I would suggest it is reviewed: "11. If they are unable to take oral medication should a health care professionally be permitted to administer medication intravenously to achieve death?" Although you can infer what the question is likely to mean, it could also be misinterpreted. Another concern I have is that if these decisions are only being conducted by a small pool of doctors then there is a greater strain placed upon them and they may feel pressured to stay in the post even if their personal feelings change. We have considerably less healthcare staff than we need and the Mental Health service is already swamped, this will not help the situation in the long run.

	<p>Disagree I disagree with assisted suicide for the following reasons. This law looks like the simple opening of a right to manage your own life, and for certain strong willed persons this is what it might be. The real problems lie with the vulnerable who are easily influenced, bullied or who are simply mentally deficient and unable to make their own decisions. As a Christian culture we believe that the weak are to be protected and nurtured, and yet here we are exposing the weak to a very real malicious and threatening new law.</p> <p>Firstly it exposes the vulnerable to the risk of ulterior external pressure from relatives wanting an easy life to relatives wanting an inheritance.</p> <p>Secondly this can easily open the door to healthcare professionals that have a murderous intent. This puts an impossible complication on any police attempt to protect the lives of the victims. Serial killers could penetrate this field and have a field day.</p> <p>Third. In other countries it is apparent that this law is abused and the scope is widened, such that rather than only allowing the death of a terminally ill patient, relatively healthy individuals begin to be included, such as those with mental illness, the depressed, those who are not terminal, simply aged etc. Suddenly the priority for those who are fragile or unwell is not to be cared for and looked after, but to be removed by an un natural death.</p> <p>Fourth. Elderly persons easily assume that they are a burden and feel entirely for the wrong internal reasons that their loved ones would be better off without them. Imagine the distress to the wider family when</p>	Not Answered		<p>Your questions are so leading it's frightening that anyone thinks they are suitable.</p>
	<p>Disagree Whether you call it 'assisted dying' or 'assisted suicide' or 'euthanasia' it all comes to the same thing - ending of a life. Once done, it cannot be undone.</p> <p>Medical diagnosis can be imprecise, particularly when it comes to the question of exactly how long a person has left to live after diagnosis. I think any implementation of a regime of 'assisted suicide' would create an additional burden for doctors and medical professionals who would be expected to implement this regime. Would they be expected to study a course on 'poisons and how to administer them'? Is there is an expectation that a doctor or pharmacist would include the 'option' of assisted dying when discussing pain relief and other matters with a patient who has a diagnosis of terminal illness? Many patients would see inclusion of assisted suicide in the discussion as a recommendation to be followed.</p> <p>I would find it very difficult to trust a doctor who would suggest suicide as way to deal with a serious, potentially painful illness.</p> <p>I have serious concerns about the increased presence of lethal substances within the community.</p>	Not Answered		<p>I think this consultation is heavily weighted in favour of the introduction of assisted dying.</p>

Disagree	<p>This proposal is inhumane but brought in the name of autonomy and freedom!</p> <p>I do not agree with this proposal.</p>	Not Answered		<p>Dr Allison seems to have time to think about rare problems concerning handful of people!</p> <p>when are you going to look at real problems of homelessness? poverty? drugs among youth? Health? fair pay to public sector workers?</p>
Agree	<p>As a funeral celebrant I often hear of people for whom palliative care has not alleviated the most distressing symptoms. People die painful, long drawn out deaths.</p> <p>I believe we should all have the choice to die with dignity at a time and place of our choice.</p> <p>Not everyone can afford to travel to eg Switzerland for an assisted death. One also has to be fit enough to travel. Doing that also risks trouble for any family or friends who accompany the patient. AD should be available to all who want it, on the IOM.</p>	For over 1 year		
Disagree	<p>Life is for living and I support palliative care</p>	Not Answered	<p>I do not agree with assisted dying so questions 12-14 do not apply</p>	
Agree	<p>Freedom of choice. Self determination</p>	Not Answered		<p>Religious beliefs should not have any role in the decision making process for any individual and also within the legislative process e.g Bishop of Sodor and any MHKs driven by a religious agenda.</p> <p>It is not a case of either/or I.e. assisted dying or hospice. They should be complementary to each other</p>
Disagree	<p>I am very concerned of the implications that making such a bill lawful would have on people in vulnerable positions. It is easy to see how someone who feels a financial burden to their family will choose assisted dying when it is not necessarily what they want. It is also easy to see that if put into law, any provisions may be removed over time. The Isle of Man has a very high reputation for palliative care, and in order to keep this, the government should focus on how to keep people alive and not killing them.</p>	Not Answered		<p>I have not answered any of the semantic questions because I disagree with the bill completely.</p>
Disagree		Not Answered		
Agree	<p>If the individual is of sound mind and is suffering, they should be given the choice to end their suffering.</p>	Not Answered		
Disagree	<p>We do not have the right to take someone's lives . If we do, we are not different to murderers.</p>	For over 5 years		<p>Alleviate the pain they have. We do not have the ability to tell if how many remaining days someone has to live.</p> <p>Emotions and illness affect the capacity to decide. If someone is in the verge of death due to terminal illness, let them die peacefully and on the right time God will take their life.</p>

Disagree	<p>As a Christian I believe in the sanctity of life and it is not for anyone to decide on whether someone should be killed. Nor is it right to allow suicide and this normalises it.</p> <p>It increases he danger of abuse, it allows people to chose to end their life when they are depressed and could be treated and able to look at life and death with a perspective the momentary depression prevents.</p> <p>Doctors are not infallible and you could have someone miss diagnosed with untreatable illness that is not correct and commit suicide on wrong information!</p>	Not Answered	<p>this questionnaire is very poorly written - most questions are not applicable if you are against allowing people to commit suicide!</p> <p>Assuming this is incompetence and not a wicked manipulation as it seems this questionnaire needs withdrawing and rewriting.</p> <p>It is a disgrace that this could be issued at all in this form.</p> <p>It would be better for it to be for those who want assisted dying only to see of they can come up with a coherent argument before putting it to the rest of the population who can clearly see the dangers.</p>
Disagree	<p>All human life should be allowed to have a natural and dignified end. This private members bill takes away this moral and basic right for all human beings to have a dignified and caring death. I feel that if this bill goes ahead we would also be allowing the terminally ill to be at risk from being looked upon as a burden to society. This is not what a civilised society should be promoting in its governance. To present this to the terminally ill as a choice, that they have the right to take their own life, is wrong. We should seek to value human life in all its different stages. Palliative care needs to be the focus for our terminally ill. It is rather depressing that following on from government's recent discussion on abortion that Tynwald is now discussing terminating human life again.</p>	Not Answered	<p>Why does this questionnaire assume from question 8 onwards that this private members bill has been successful. Why not any questions like:</p> <p>Could we improve palliative care on our Island?</p> <p>This questionnaire is bias towards the bill having a successful outcome.</p>
Disagree	<p>despite the attraction to help people with terminal diagnosis die peacefully to avoid suffering, I am not persuaded that it is safe.</p> <p>I say No to this proposal.</p>	Not Answered	<p>assisted dying has not been fool proof in any country.</p> <p>whatever happened to the basic tenant of criminal law? many criminals may escape but one innocent shouldn't go to gallows.</p> <p>There are so many loopholes and opportunities for this law to be abused and innocent and vulnerable to be sent to death.</p> <p>I am not for it and I think the island should say no too.</p> <p>Allinson, please stop bringing this change which will adversely affect generations to come.</p> <p>MHKs, please stop this bill becoming law.</p>
Agree	<p>Out of respect for humanity, nobody should suffer beyond their limits</p>	Not Answered	<p>Doing the consultation is very important, respectful and effective.</p> <p>Thank you for doing that</p>
Disagree	<p>Basically, I believe in the sanctity of life and having worked in palliative care myself have seen that unpleasant symptoms can be managed. I have nursed individuals with disability who would be unable to take the proposed medication themselves.</p>	For over 5 years	
Agree	<p>An individual's right to chose and control their life.</p>	Not Answered	<p>This has to be an individual's choice with no coercion from relatives or government.</p>

Agree	<p>Assisted dying is a human right.</p> <p>The Isle of Man can show its courage and compassion by standing up to individuals and groups who want to impose their religious convictions on this discussion - this is tyranny of the minority. This minority are very vocal and well versed in manipulation of surveys, facts and figures and also using very emotive language and factual assertions that are erroneous when researched. Please see their latest leaflet, distributed door to door, which is very misleading in its narrative and employs fear tactics.</p> <p>When the correct facts are available they support the position of freedom of choice, i.e. the right to choose when the time is right for a person to die rather than have to wait for a death controlled completely by a person's terminal illness and/or medical profession.</p>	Not Answered	<p>This Bill is very important for the Isle of Man because it demonstrates the maturity of this Island in supporting a fundamental human right. This discussion must be secular and ethics centred in nature and fact based in argument. The proposed safeguards and filters are directly related to sound ethics and governance of the process and will prevent abuse of the Act.</p> <p>Please do not allow this important discussion and debate to be hijacked by religious agendas. Over hundreds of years those agendas have resisted the granting of other human rights in relation to the rights of women to vote, work and take control of their bodies, the rights of people of colour to be afforded respect, value and access to social, political and economic equity, the rights of people to have same sex relationships.</p> <p>If MHKs and MLCs choose to vote according to their religious doctrine, then this must be transparent not only in the House of Keys but also to the electorate.</p>
Disagree	<p>The vulnerable need to be protected and I have read many reports from the countries who have introduced this bill, it's not the way we should go!</p> <p>The following questions are not applicable if i disagree with the assisted dying bill.</p>	Not Answered	<p>I disagree with assisted dying bill in every aspect and so have not answered questions from 8. - 28 as they are totally misleading and have been written to mislead people.</p>
Disagree	<p>Totally disagree with the assisted dying bill introduction to the Isle of man.</p> <p>Not practical and does not protect the vulnerable.</p> <p>I will not be filling in answers to the misleading questions that follow as the are not applicable if I have said NO I disagree!</p>	Not Answered	<p>Against the bill and totally disagree with the way the consultation paper has been written I feel it has been designed to make people have to answer all the questions which is silly if they disagree with the introduction of this bill.</p>
Disagree	<p>I am concerned that by bringing in this bill we will be devaluing life and how precious it is. I am concerned for those vulnerable adults that may feel they do not wish to be a burden on their families or friends or have a temporary period of depression. I feel that this will be a gateway which will widen its inclusion criteria as time goes on, such as in Canada to include mental and physical disabilities.</p> <p>I feel it would irrevocably alter the doctor-patient relationship and place doctors in a compromised position ethically.</p> <p>Also palliative care in the Isle of Man and UK is exceedingly good and this bill may hinder its progress to better medications and treatments.</p>	Not Answered	<p>I would like to reiterate my concerns if the vulnerable in society may feel coerced into taking the option of assisted suicide.</p> <p>I feel the term 'assisted dying' itself downsizing the gravity of taking ones one life, suicide.</p> <p>I am very concerned that this will be tge start of a slipper slope into wider and wider inclusions.</p> <p>I do not wish the Isle of Man to be synonymous with a 'freedom to flourish' not a 'freedom to die'.</p>

Disagree	<p>I do not believe people can be in a sane mind to want to die. People often change their minds about a great many things, they would not be afforded such luxury here. Where this has been written into law surveys have been taken where people list not wanting to be a burden as their reason for wanting to die. We are all going to die, after all it is a part of life, with the care that is given in hospice there is dignity in death.</p> <p>I also feel that the relationship between patient and Doctor would be changed and for the worse. People with long term conditions would face this question throughout their life. People who have long term or chronic conditions can enrich society as much and maybe more than others.</p>	Not Answered	
Disagree	<p>As a Christian I believe it is morally wrong. Taking other man's or a woman's life away is a sin. Doctors & nurses are conflicted if they would be asked to assist in helping someone to die. Their job is to heal people & not kill them, & they should never be put in this situation. A sickening thought, I would never like to be in this horrible situation & don't wish it on anyone. It is wrong, simple.</p>	Not Answered	<p>In my understanding assisted dying is not nice, easy or humane in any way. A huge NO from me.</p>
Disagree	<p>We have no business in playing God and ending someone's life prematurely.</p> <p>The slippery slope is very real. We can see from Canada's euthanasia law that an initial change of law to provide euthanasia from the terminally ill led to for the chronically ill and disabled, to mentally ill etc.</p> <p>It is unethical as doctors' and other healthcare providers have conscience rights that should be protected, and it harms the doctor-patient relationship.</p> <p>It is unnecessary as it provides an alternative to improving palliative care, to which too many have inadequate access.</p>	Not Answered	<p>This Bill should not be passed.</p> <p>The presence of lethal unregulated doses of drugs in people's homes is dangerous.</p> <p>Advocates of this Bill must not be allowed to leave the details of review procedures and the intended contents of annual reports to later regulations: the plans must be open to scrutiny before any further legislative steps are taken.</p> <p>Most importantly, murder is a sin. And indeed we all have sinned, from lying to stealing to blaspheming God's name. God is perfect, so sin is anything that falls short of this, despite how "petty" they may seem to us. If God were to judge us for our sins, we would be guilty and be sentenced to hell. But God is merciful and loves us. He wants to forgive us, but he is also just, and can't just let our crimes against him go without any payment, just like an earthly judge can't let a criminal go without a payment for the crime. That is why God sent his Son Jesus Christ into the world. Jesus lived the perfect sinless life we could not, and died on the cross for our sins. He died the death we deserved for our sins, and rose again three days later, proving his divinity and that his words were true. Jesus paid the fine for our sins. In order to receive this free gift of forgiveness, what we need to do is repent or turn away from our sins, and put our faith and trust in Jesus, believing that his sacrificial death on the cross served as the payment our sins deserve. Then we can be restored to a right relationship with God, and have everlasting life.</p>

Disagree	<p>I disagree with every aspect of assisted dying and see no need for this bill to be introduced to the island.</p> <p>We need to protect the vulnerable in our society and ensure we are a loving community. Statistics from other countries show the worrying slip of the value of life once this type of legislation is introduced.</p> <p>I will not be answering the questions that follow which I consider N/A following my answer to question 8.</p>	Not Answered	<p>Nothing to be added as this bill should not be introduced at all especially after this consultation which is so flawed in the way it has been written.</p> <p>NO to assisted dying!</p>
Disagree	<p>I am concerned that vulnerable people who are ill or have a chronic condition would succumb to pressure from others to seek assisted dying when previously it would not have occurred to them. This pressure could be real or imagined and for a wide variety of reasons, but would only be made possible by assisted dying becoming law. People should be allowed to live out their life to it's full length without experiencing the pressure to end it.</p> <p>The introduction of assisted dying would also do damage to the doctor patient relationship as doing no harm would no longer be what we could expect.</p> <p>I am also concerned that if assisted dying became law in a limited capacity it would later be expanded and extended, putting even more vulnerable people at risk/under pressure.</p>	Not Answered	<p>I am disappointed that from question 9 onwards this survey makes assumptions that this bill will go through and therefore all of these other questions need answered now. I would therefore like to reiterate that I do not want this bill to go into law and therefore cannot answer many of these questions.</p>
Disagree	<p>Broadly speaking I disagree because I fear that though in some instances it can be humanely justified, it can open the door to possible misuse of the powers that will be given to the medical profession by the new law.</p>	For over 1 year	<p>I do not agree with a bill to allow permission for 'assisted dying', but I do think that an extension of the palliative care system at the IOM Hospice could be an option.</p>
Agree	<p>I have seen a close friends and family in real distress at the end of their lives and some would have wanted the option of a dignified end</p>	For over 1 year	<p>Question 25, have answered not sure as the person involved might only want loved ones with them and not be overlooked by an outsider</p>

Disagree	<p>I disagree that assisted dying should be permitted. Assisted dying is unethical and risks a future or a danger of abuse in disabled or vulnerable people and normalising suicide.</p> <p>Regardless of a person's capacities, or beliefs, I believe that all people should be valued and receive dignity at any stage of their life. There are people who feel worthless but as a Christian I know they are loved by God and are a valued member of society.</p> <p>So no one should have to feel they are a burden to their loved ones or to society to end their life especially out of a sense of convenience.</p> <p>Therefore, no one has the right to decide if a life is worth living or not especially if that person is vulnerable and or lacks the capacity to decide for themselves.</p> <p>The care of dying is the responsibility of society by talking about the taboo's surrounding death, and emphasising people are valued at all stages of life and during their illness.</p> <p>A 'good' death' through 'end of life' (palliative care) in my experience should be the first and foremost care available for the terminally ill whether at home, the hospice or the hospital.</p>	Not Answered		
Not Sure	<p>Okay in isolated instances</p>	For over 1 year		<p>Only (if at all) it should be for people who are terminally ill and are suffering unbearably.</p>

Disagree	<p>As a doctor practising on the Isle of Man for 30 years I am fundamentally opposed to any legislation to bring in assisted dying.</p> <p>This presupposes that people are in unbearable suffering with a terminal illness that cannot be alleviated . This shows a profound lack of knowledge of palliative care. It is disingenuous to suggest this is the case and spread fear among those facing this diagnosis. Modern palliative care started in the uk and the uk is a world leader in providing high quality palliative care and symptom control. Hospice Isle of Man provide excellent palliative case both in the in patient unit, advising Nobles hospital and in the community . All individuals who are terminally ill here have access to this freely provided service. Therefore there is no need on the Isle of Man for this bill.</p> <p>Patients diagnosed with terminal cancer need symptom control, holistic care and support to enable them to optimise the time they have left - not to be encouraged to take their own life . Individuals in these circumstances are in a vulnerable situation and evidence from other jurisdictions where assisted dying is legalised has shown that they can feel an obligation to choose assisted dying - 54% people requesting assisted dying in Oregon cited not wanting to be a burden to their family as the reason for requesting this.</p> <p>It is known that 500,000 people in the UK experience elder abuse from family members - it is not possible to safeguard against this and ensure it is someone’s free will send not pressure from others.</p> <p>I do not believe safeguards cab be put in place which sufficiently protects the vulnerable. The safeguards put in place in other jurisdictions haven’t worked and wont work here.</p> <p>In these other countries , assisted dying was brought in for occasional hard cases but the boundaries are gradually widened as society becomes</p>	For over 5 years	There must be no financial incentive for any doctors involved in the process.
Disagree	<p>Terminally ill people need love , palliative care and support and NOT assisted dying</p>	For over 5 years	<p>The whole idea of assisted dying is absolutely abhorrent. I am disgusted by the government on the Isle of Man in propagating this horrendous suggestion</p> <p>It is an easy , unacceptable option which could encourage some people who feel that they are in the way....to apply for assisted dying.</p>
Agree	<p>I see no point in living anymore when active life is no more</p>	For over 5 years	No
Agree	<p>Whilst I have personal reservations about assisted dying, I firmly believe that it is wrong to prevent others whose views differ from having a right to take advantage of assisted dying in the circumstances outlined and with appropriate safeguards.</p>	For over 1 year	<p>I am conscious that I have stated that I am not sure or "no" to some questions and wish to clarify my reason for doing so.</p> <p>24. With fluctuations in condition, some patients may feel better one day and conclude that they can continue but as they then deteriorate further realise they were being optimistic. They should not have to go through the process again to obtain a prescription.</p> <p>25. Since the proposal envisages self administration at a time when no health care professional may be present, this seems impossible to achieve.</p> <p>27. The living will or advanced directive may have been made many years prior to the time when assisted dying is under consideration. It is capacity at that point that matters.</p>

Agree	also those with unresolvable illness which is causing intolerable suffering. 'Diginity in Dying' with its limited categories of eligibility is actually a discriminatory and cruel benchmark. It affords dignity to some, but denies it to others, and it is not for me or anyone to tell another human being that their suffering should be prolonged against their wishes.	Not Answered	Palliative care is not always effective in bringing relief from suffering, whether in a hospice or at home. Autonomy and choice are crucial aspects of citizenship in a caring society.
Agree		For over 1 year	
Agree	Whilst it is claimed that modern medicine can control pain this is not the case eg I have chronic arthritis and the pain cannot be controlled.	Not Answered	
Disagree		Not Answered	I do not agree with the proposal. The questions are not impartial. Do something useful in government that helps most of the people
Disagree	It is not natural. Assisted dying is just another way of saying assisted suicide. There has never been any good connotations for the word suicide, therefore I strongly disagree with the statement above.	Other	I disagree with assisted dying. Assisted dying or assisted suicide should not be permitted in the Isle of Man. The only other country that allows this is Switzerland, whereby, many non-residents visit to have assisted suicide. As a resident of Isle of Man, I would not want non-residents to come here for their deaths. Neither do I want residents to think that this should be a consideration for their lives. I know the Isle of Man have accepted many immigrants and refugees - it is a place of freedom, to me it's a place of growth, it is a place to start again. From my perspective, if the bill goes out and is approved for, let's say residents only, surely non resident would like to appeal to this. It would be a shame to see Isle of Man appear on BBC news announcing their approval for assisted suicide. This does not represent the place of freedom and growth that I grew up in.
Disagree	some people's freedom to choose must not affect many of weak and vulnerable. This law has been introduced in several countries. There is ever expanding groups and numbers killed in the name of freedom. Surely it proves safeguards cannot be guaranteed. I am a realist and I think this is not for the island.	Not Answered	only that I feel the questions are unfair and assume that I give approval for the proposal.
Disagree	Vulnerable adults at risk and palliative care will take a hit .	Not Answered	
Disagree	I am concerned about the dangers to the vulnerable with such a bill, that they could be manipulated by relatives wishing to receive their inheritance or that a terminally ill person may feel pressure to end their life prematurely so that they are not a burden. I would prefer focus to be more on continuing to improve our Palliative Care. Please note I do believe that we have an excellent palliative care system but there are always advances in medicine which would be beneficial	Not Answered	I believe strongly that if this Bill goes ahead that medical professionals should be able to conscientiously object to being part of any assisted dying programme without any detriment to them or their career especially as assisted dying goes against the Hippocratic Oath

Disagree	<p>My wife died of bowel cancer two years ago. I looked after her at home for the last five weeks of her life supported by the local palliative care team, who minimised the pain she suffered and allowed her a good death and me good memories of her last days. A change in the law is unnecessary. It is likely to increase assisted suicide by encouraging people to feel a burden and allowing health services to use it to save money and not to improve palliative care. It is very difficult to put safeguards in place, as demonstrated by the steadily increasing numbers of assisted suicides in countries that have changed their legislation. If suicide is allowed for the terminally ill (however that is defined: my wife's oncologist responded to her question 'is it terminal?' that it depended on many factors) it will drift to the disabled and the mentally ill and the chronically ill. It's a culture of death. We try to dissuade young people from committing suicide and refer people to the Samaritans - legal suicide will change the culture for these people as well. Doctors and nurses and pharmacists are supposed to do no harm; involving them will make patients suspicious of the motives of professionals, many of whom would anyway find the process of assisted suicide unethical and not want to be involved.</p>	For over 5 years	<p>Wanting to legalise assisted suicide is probably driven by compassion for the small number of people who might suffer 'unbearable' suffering at end of life. It arises out of our consumer society in which each individual is supposed to have complete control over every aspect of their lives, irrespective of any effects on anyone else or on wider society. Best left alone to avoid introducing a culture of death. Otherwise people who have a terminal illness, or are disabled, or chronically ill, or demented, or mentally ill, or chronically depressed, or under age will be persuaded to feel themselves a burden or of no importance or interest to society. Much better to improve palliative care and look after our most disadvantaged.</p>
Disagree	<p>My concern would be that if given the choice, people would feel under pressure and obliged, as they would be frightened of becoming a burden on their family. They could feel a pressure from society from the cost point of view.</p> <p>It is also very difficult to predict when someone has six months left to live. Errors do happen.</p> <p>I would also be concerned that safeguards that are put in place initially if this law was passed could gradually be eroded away . We could see this law being available for people with dementia, mental illness, depression and disabilities. This is worrying.</p> <p>We have an excellent Hospice on the Island giving end of life care. They support the patient. But also offer support for their family and friends before and after the death of their loved one.Would this support be available if someone was assisted to die? Who would offer professional support?</p> <p>The time leading up to someone’s death can be very useful for them to organize their affairs and to say their goodbyes to family and friends, in their own time.</p> <p>We have trouble recruiting GP’s and Nurses to the Island(I work in healthcare) I don’t think offering Assisted Dying would encourage any caring Health Care Professional to want to work here.</p>	Not Answered	<p>I am unable to answer many of the latter questions as they are biased, and I am opposed to the introduction of this legislation.</p>

Agree	<p>It provides a freedom of choice for an individual in a caring and compassionate society to decide how to end their life with dignity, subject to appropriate checks and balances being in place.</p>	For over 1 year	<p>How will disputes between doctors/ assisted dying patients be dealt with?</p> <p>Doctors should be registered and be currently practicing in the Isle of Man. To prevent a doctor of another jurisdiction being engaged to make the decision.</p> <p>The doctors should have appropriate medical qualifications to make the decision.</p> <p>The legislation should include a review of its effectiveness after a suitable period - eg after two years of implementation.</p>
Disagree	<p>I think that terminally ill adults (all of us at some point) on the IOM need support to die well, and in comfort. My view is that all people should have full access to appropriate physical, mental, psychological and spiritual support as they approach death.</p> <p>My main reason for disagreeing with legal assisted dying (including assisted suicide and euthanasia) in principle is based on personal research about its pros and cons, looking at examples in countries where it is legal and where it is not.</p> <p>My conclusions, in summary, are: -</p> <p>a) the risk (of erroneously agreeing to be assisted to die) to vulnerable persons, especially but not exclusively those with learning support needs and dementia, is too great even with many safeguards in place;</p> <p>b) in several countries where assisted dying has been legalised in the way proposed here, legislation has later been amended to include more groups of even greater potential vulnerability, e.g. non-terminally ill people with certain conditions;</p> <p>c) I cannot find a satisfactory and definitive way in which someone can be defined as terminally ill within a certain enough time scale. Terminal illness is subjective, complex and sometimes not even terminal; and</p> <p>d) the evidence for rapid and continual advances in care suggests that the benefits of providing dignity and support in dying through palliative care greatly outweigh the advantages of providing physician-assisted dying, i.e. the rate of medical advance would overtake the proposed legislation so that it would be obsolete as soon as it came into force. This applies in the IOM, where I believe that Manx Care (including primary, acute, integrated and social care) and appropriate organisations such as Hospice can come together to provide excellent and safe end of life care. As the</p>	Not Answered	<p>I feel unable to answer most of the questions on eligibility and process since I cannot support the principle. If, however, the bill is passed into IOM law I would expect an annual report to be published regarding the numbers taking advantage; and I would predict that when the numbers increase to a certain level there will be pressure to amend and widen the legislation. It is very concerning to note that data exists to show that in some countries where assisted dying is legal a majority of people seeking this option say that they do not wish to be a burden on their family. I cannot envisage any legal structure that would completely safeguard against what, for such people, is becoming an obligation rather than a choice.</p> <p>I would further expect that ALL applicants for assisted dying should be required to undertake a psychiatric capacity assessment, not only those about whom a doctor is unsure.</p> <p>I would strongly support the development and improvement of the current health and social care system as a higher priority than the introduction of legalised assisted dying because it would reduce the likelihood of patients seeking assisted dying when the system was unable to provide for their needs. There are recent instances of exactly this happening in, for example, Canada.</p> <p>Related to this, I would be concerned that financial considerations at personal, family, health care and government level could become prioritised in certain circumstances.</p> <p>I would be strongly in favour of sticking with current legislation, which in my view is sufficient bearing in mind that in rare cases of doctors or others going to trial for murder, a judge and jury have the right to use discretion in their decision.</p>

Disagree	<p>I vehemently and strongly disagree with this bill.</p> <p>It is against everything that the laws of the Isle of Man and Britain stand for. For centuries our laws which are based on morality and biblical principles have governed this land for good.</p> <p>This legislation is wrong, and if allowed to be passed will be one of the worst things to ever happen to the Isle of Man.</p> <p>Our times are in God’s hands, and it is not for us to determine when someone dies.</p> <p>I think if any member of The House of Keys pass this bill they are presuming the position of God, which is a very dangerous position for any human to take. Anyone who passes this bill will have to give an account to God on judgement day for the decisions they have made as elected members, on behalf of the people of the Isle of Man.</p> <p>The bible says ‘Our times are in Gods hands’. It is not for us to determine when someone should die, or even the person themself.</p> <p>We always have hope, but this law is basically saying there is no hope.</p> <p>We need to encourage people, in truth, that Jesus provides- that He died on the cross and rose again for our sins and if you believe this you will not die but have eternal life.</p>	Not Answered	
Agree	<p>I have witnessed unpleasant deaths. If an animal was subjected to the conditions of these deaths the farmer/owner would have been in court.</p>	For over 1 year	<p>No Dr may benefit from the will/ estate of a person who opts for assisted dying</p>
Agree	<p>Would not restrict assisted dying to "terminally ill". In principle I'd regard assisted dying as a Human Right and allow freedom of choice in this as well as other matters.</p>	Not Answered	<p>These consulation questions are very specific and prescriptive, they do not allow for a wider discussion. For example, this consultation does not facilitate the expression of my views, for example: I would remove the involvement of doctors (and most other health care professionals) from the assisted dying process. Advantages / justification:</p> <ol style="list-style-type: none">1. The safeguards could be (probably better) assessed by lawyers, with pharmacists providing the necessary drugs on the lawyers' order.2. Some say that involvement in Assisted Dying would damage the doctor / patient trust relationship (e.g. if a person feels their doctor might kill them). There is merit in this view. Eliminating doctors from the process would address this concern.3. Doctors are busy people, it is better to use their skills for conventional treatment / healing work.4. The tasks proposed for doctors in this consultation are, for the most part, not requiring of medical training or skills; and might well be carried out better by others, e.g. lawyers and pharmacists <p>4.</p>
Disagree		Not Answered	<p>I disagree with assisted suicide and agree that this bill should not be passed.</p>

Disagree	The person considering assisted dying is likely to be in a vulnerable state, being a person with a terminal illness. The person may change his or her decision. This an important consideration as the decision will be permanent. Assisted dying leaves the opportunity for abuse by third parties, taking advantage of the death of the individual.	Other	Assisted dying is by its nature problematic. I consider that assisted should not be permitted what ever procedure is used.
Disagree	<ul style="list-style-type: none">•Assisted dying is essentially assisted suicide – we are not the giver, sustainer and taker-away of life. Instead of giving freedom to patients, assisted dying and therefore (assisted suicide) is really about giving other people the legal power to end another person's life.•Assisted dying is not required - there is Palliative care. An effective and respected palliative care and hospice system is fully in place already. Symptoms of physical suffering at the end of a disease/illness can be managed with medical therapies and palliative sedation if necessary, making assisted dying completely unnecessary.•Assisted dying places an unnecessary and unhelpful burden on doctors and other medical staff - the assumption that patients should have a right to die imposes a duty to kill on doctors – this goes against the (their) Hippocratic Oath. Experience shows that when you allow assisted dying (assisted suicide) for severe physical suffering at the end of a disease/illness, little by little, doctors will be also asked to solve the underlying psychological and spiritual problems of their patients by administering death.•Assisted dying lacks compassion – the promoted view of assisted dying (assisted suicide) is that helping someone else to end their life is the most loving and compassionate thing to do. However, the present and solidly accepted human practice and surely the most compassionate thing to do is to care for a person at the end of their life and to show them that their life has tremendous value regardless of age, abilities or extent of their illness.	Not Answered	<p>Please note: where previous questions have no response this has been left because the specific questions are seen to be leading to an acceptance at various levels of assisted dying. Assisted dying is not accepted in any form – hence, those specific questions have been left blank.</p> <ul style="list-style-type: none">•Assisted dying is essentially assisted suicide - we humans are not the giver, sustainer and taker-away of life. Human life bears God’s image and it is not for us to terminate. These are divine prerogatives, not ours, otherwise this is the height of human arrogance. Although the current proposal (assisted dying) is expressed by the promoter as being narrow it will inevitably expand as it has in other adopted countries. People now also seek assisted dying not for unbearable physical symptoms but those experiencing a ‘lack of meaning in life’ or ‘limitations in their activities’ - evidence indicates assisted dying has been provided to hundreds of people who are not terminal cases.•Assisted dying is not required – there is Palliative care. Proper palliative care makes assisted dying completely unnecessary. If the law is changed there would be a great risk that people would feel pressured into accessing assisted dying (assisted suicide). At present if you are a burden on your family and the state and have a sensitive conscience you don’t need to feel guilty about being a burden in the sense that there is nothing you can do about it. If assisted dying (assisted suicide) became available, though, then there would be a mechanism sanctified with legal approval, that you could take. Palliative care not only allows you to die with dignity but enables you <p>Although it should not be officially allowed, it should be (and possibly is) looked at sympathetically by the courts.</p>
Disagree	It would be the start, and then would become more open. 'Thin end of the wedge' type of thing.	For over 5 years	
Disagree	<p>Q9 below: N/A</p> <p>I don't agree with state-sanctioned killing of fellow members of society. This would not accord with my religious beliefs on the sanctity of life. Nowhere in the Holy Scriptures is assisted dying commended. I don't see that assisted dying would serve the furtherance of the Kingdom of Heaven here on earth.</p> <p>Furthermore, I fear that this proposal could end up being the first step in a dangerous trajectory. If this were to be accepted, what might be proposed further down the line?</p>	Not Answered	
Disagree	The person may be vulnerable and should be protected from making a decision with fatal consequences.	For over 5 years	Assisted dying is problematic irrespective of which method is used.

Disagree	<p>Like with many things, it is not where it all begins but, where it could all end, that counts. It is not the power, but the abuse abuse of power that is the over-riding concern. For this reason the door to such abuse should always be kept firmly closed.</p> <p>The law working in other countries highlights the obvious opportunities for abuse with documented history of the process failing badly.</p> <p>The concept of a peaceful, painless death is a complete fallacy as, under assisted dying laws, the required drugs have to be orally ingested within in a brief timespan requiring a vast quantity of pills to be consumed to guarantee death. Even then, the ultimate result may not be achieved for hours.</p> <p>Heavy sedation and pain relief under palliative expertise will, in most cases, achieve the same result with far less trauma at the point of the natural death.</p>	For over 5 years	<p>I don't agree with assisted dying for the reasons stated from the outset. My other answers reflect that there is no, 'branch off,' option on the questionnaire flow chart e.g. for, yes, answer these question and, for, no, an alternative option. In absence of this choice, I have answered as best I may.</p>
Disagree		Not Answered	
Disagree	<p>As a practising Christian, I believe that all life is God given and precious; life should not be ended prematurely. This view extends to abortion as well.</p> <p>The proposed Bill will further damage the Isle of Man's reputation for preserving life.</p> <p>Furthermore, it has the potential to further de-stabilise the provision of healthcare on the Island.</p> <p>All questions beyond 8 are biased and therefore irrelevant because they assume the Bill has merit. I note this section is strictly limited in capacity!!</p>	Not Answered	
Disagree	<p>This proposal will be the beginning of an uncontrollable process,as per Canada extending the categories</p> <p>It is unnecessary and an intrusion by government</p>	Not Answered	<p>It is clear from the way the survey has been worded that there is a determination to make this law</p> <p>A disgraceful attempt to confuse the public ,but not unusual .</p> <p>I will certainly vote against any MHK who votes for this retrograde step</p>

Disagree	<p>There is a number of reasons I feel it should not be permitted. Ultimately as a health care professional myself, I would not wish to have an involvement in the ending of someone's life and therefore I would not expect anyone else to be involved either, I think ethically it is not acceptable to ask people to be involved in such a thing, it would have a huge impact for GPs, pharmacists and doctors in general. As a Christian I strongly believe it is not for us to decided when our lives end and we should not "play God". I worry for vulnerable people who are made to feel like they are a financial burden to their families. I question how doctors will deem patients to have or not have capacity when there are no laws defining capacity on the Isle of Man. It is concerning that there is minimal research into the drugs and doses required to end life - the little research that has been undertaken suggests that artificially ending life can be extremely painful and take a long time - up to 30 hours as the body is very resilient and not ready to die. As drugs are not made in the doses required to end life the person taking the medication could be expected to take over 300 tablets in 5 minutes - practically not possible. There is no agreed protocols in the drugs or doses to take - very concerning. It is also a real concerns that a gradual societal desensitisation to active killing means any safeguards are not followed as time passes. It is also impossible to rely on possible life expectancies - it is impossible for doctors to estimate with any certainty the life expectancy of patients. It is possible new treatments will be introduced which could effectively treat them. Up to 40% of cancer patients may suffer depression following a diagnosis - this means requesting assisted dying could be a symptom of their depression and decisions made at this vulnerable time are not safe.</p>	Not Answered	<p>I feel this consultation is geared towards those who are in favour of the bill. I have omitted answering a number of questions as I do not endorse the legalisation of assisted suicide. The questions focus on minor issues rather than the much wider and concerning issues. Question 10 refers to "unbearable suffering", a term which is totally subjective. Question 11 uses "unable to take" which could have a range of interpretations - is that physically unable or nerves preventing self administration? Question 22/23/24 are very concerning - the prospect of lethal quantities of drugs circulating in the community is frightening, leading to ethical and moral questions for those dispensing them as well as a huge cost - even if patients decide not to take the drugs they cannot be returned and used for something else, only destroyed. The proposed "assisted dying" is fraught with ethical, moral and practical issues. The countries currently offering assisted dying have very poor palliative care options - in the IOM we have excellent hospice provision to ensure those in their care have "a good death". The Association of Palliative Medicine is strongly against assisted dying - surely we cannot ignore the opinion of experts in this area? Those who spend the most time with those who are dying are the ones who least support assisted dying. I strongly feel that commercial companies should not be introduced to provide euthanasia services - I feel it is a horrific idea that there could be commercial gain from ending the lives of vulnerable people and I do not feel they could be trusted to follow safeguards and properly screen individuals who approach them. Equally, I strongly feel there should be no expectation for Hospice to have any involvement in the proposed process. To conclude, another area of concern is to</p>
Disagree	<p>Thin end of the wedge</p>	Not Answered	
Disagree	<p>You will end up extending to other categories</p> <p>All life is a sacred gift from God.</p> <p>The ease of such legislation enabling undue pressure being applied to the elderly and those who suffer from emotional, physical or financial abuse.</p> <p>Experience of other jurisdictions adopting such legislation is not encouraging.</p>	Not Answered	
Disagree	<p>I am concerned that the person could be coerced by family, friends, others and be made to suicide. I am also concerned that if a person changes their mind there will be a lot of pressure self -imposed that they are letting others down, or external and so continue when it is not what they want. I don't want pharmacists and doctors and nursing staff to be pressurised to do this or abused if they refuse.</p> <p>I think it would be the beginning of a slippery slope and the circumstances would be diminished to eventually when people are inconvenient in society or the State wants to reduce costs ..the "perfect Aryan" scenario.</p>	Not Answered	<p>All should have a psychological assessment before seeing a doctor. I do not want this to became law as there would be a lot of pressure from relatives who no longer want to care for their ill relative or pay care costs to get them to suicide so the relatives/ carers don't have care costs etc. and retain as much of the finances and assets of the ill person. Vulnerable people could feel they have to submit to this form of suicide as they feel guilty for needing the help/care.</p> <p>I do not want innocent people like doctors, pharmacists, others to be forced to effectively murder people...it is dehumanising both for the terminally ill victim and the health professional.</p>
Disagree		Not Answered	

Agree		Not Answered	
Disagree	I am opposed to the concept and principle of Assisted Dying and any form of Voluntary Euthanasia and therefore do not support the legalisation of this measure as a statutory right. I believe it is socially, morally and religiously a concept I cannot and will not support.	Not Answered	
Disagree	I am opposed to the concept and principle of Assisted Dying and Voluntary Euthanasia. I therefore cannot and will not support any legislation supporting it as a statutory right.	Not Answered	
Disagree	I feel that such approach would be unethical and would impact the care of terminally ill persons. Every person should be treated with dignity being terminally ill is only a part of persons life and does not determine their value as a human being. Each individual life is precious and should be treated with respect. Those whose health is impaired depend on the society to help them and ease their pain and provide as much comfort as possible. Introducing assisted dying would level up all individual cases into one "disposable" category and therefore would not allow for individual approach for care of terminally ill; which besides being ill are different people with different lives and different needs.	Not Answered	
Agree	I watched both my aged parents have protracted painful deaths. My mother rightly said a n animal would not have been allowed to suffer as she was, we had been told 9 months prior to death that it was terminal. My father said if he had known he would not have had all the treatment as it had merely prolonged his pain and dying.	Not Answered	
Disagree		Not Answered	I feel that this Bill would be detrimental to the Island.
Disagree	Despite safeguards promised to be put in place, evidence from jurisdictions that have allowed assisted dying have seen these gradually eroded eg Canada. Pressure that maybe put on the venerable to ask for this, also pressure felt by the person themselves to do the right thing and not be a burden Palliative care is at such a level on IOM that pain free dignified dying is fully possible. I have personal experience of this Funding for palliative care will be reduced if assisted dying is allowed, evidence for this can be found in countries with assisted dying is allowed in law Terminal diagnosis is far from sure in time to death	Not Answered	I am against Assisted Dying I believe with palliative care at it's current level now makes this bill unnecessary this care will only get even better with time due to advances in medicine. I believe this bill if passed will lead to more eligible catorgeries to be added with terminal illness only one of many
Disagree	I believe life is precious. By bringing in this bill undue pressure will be put on people to end there lives.	Not Answered	
Agree	I have seen close family members and close friends suffer unnecessary pain and suffering - I definitely think had some of them had the choice, they would have chosen assisted dying. It is something I believe I would choose when the time comes if available.	Not Answered	I don't think people should be able to take the medication in their home obtained on a prescription by either themselves or a relative. I think assisted dying should only take place under dedicated medical care.

Disagree	<p>It's clear that the potential for an irreversible assisted death to be carried out, where the individual is being deliberately or inadvertently coerced (eg thinking they are a burden) is a high risk; as is the risk of someone dying when in fact had they survived a while longer they may have changed their outlook.</p> <p>It's also a dreadful step in the direction of euthanasia. We should focus more on improved palliative care.</p> <p>In addition from my personal perspective, it conflicts with the values of my faith tradition.</p> <p>I'm not responding to the remaining questions as these presuppose that the AD bill goes ahead, and that would be unconscionable.</p>	Not Answered		
Disagree	<p>Every person has been given the gift of life and I think we should see it to the end assisted dying is like aiding and abetting to murder and to be left with that kind of guilt isn't fair on anyone we have palliative care there are drugs to ease pain there's other options I'm sure</p>	Not Answered	This shouldn't be allowed	Praying for you all very much
Disagree	<p>More money and consultations should be put into palliative care. Looking for ways to improve and enhance the treatment, improving people's end of life as comfortably as possible with dignity. Also, possibility medications given may not kill the person leaving them in a worse state. Life is precious</p>	Not Answered		
Disagree		For over 5 years		
Disagree	<p>I believe God is ultimately in sovereign control over life and death.</p> <p>Introducing this bill as law would be interfering in Gods ultimate purpose of life. I also believe that God can and has healed people with all sorts of illnesses and have witnessed them with my own eyes, people given 6 months to live, were prayed over and have lived over 2 decades longer in good health. I aldo do not like the idea of our Island becoming a tourist destination where they can come to die.</p>	Not Answered		<p>Introducing this bill would contravene the Isle of Mans Criminal Law Act 1981. Introducing this bill would open the flood gates of anybody who may be going through a difficult time in their life to simply pull the plug and leave and having the option to do so would I feel create more pressure upon them especially if they feel they are becoming a financial burden.</p>
Disagree	<p>In my opinion there is no difference between assisted suicide and murder. Murder committed by the doctor 'hoping' the person to commit suicide.</p> <p>If murder is punishable by prison/death/fines/whatever else then so should any doctor assisting someone to kill themselves. At the very least they are guilty of committing manslaughter.</p>	Other	For their lifetime.	<p>I am appalled with this 'consultation document'. It is NOT an open, unbiased request for how I , or anyone else, feels about the matter, but rather the questions are biased and loaded in favour of the matter. It is as if It is there has already been a decision taken that this matter is already a 'fait accompli' and that this 'consultation document' is done just so that the 'powers that be' are able to say that the public have been consulted. It is the most biased research document that I have ever completed.</p>
Agree	<p>I support this being an option as I think to some it would be a more humane way to deal with terminal illnesses without having to suffer tremendously</p>	For over 1 year		
Agree	<p>People should be able to decide to keep their dignity and leave when they would like instead of having to endure months of suffering for them and their loved ones.</p>	Not Answered		
Agree	<p>People should be able to have the choice. It's incredibly unfair and cruel to the individual and the family/friends to go through that without the choice.</p>	For over 1 year		

Agree	terminally ill people are way more likely to attempt suicide, so provide them a safer way that's way less harrowing for families.	For over 1 year	i don't think they should be taking it without a doctor/professional present as id be worried about the chance of abuse/force via a family member to take the medication themselves, or force the patient if they change their mind.
	i think it's so ridiculous we're at this point still of forcing people live when their quality of life is massively reduced and they simply don't want to, it's a god complex that doesn't actually consider the person at the heart of the issue,		
Agree	Strongly agree that terminally ill people should be able to die with dignity without having to suffer or let their families see them suffer and change as a person.	For over 1 year	I think that it should be administered in the presence of a healthcare professional. I do not think it should be available from a pharmacy to be taken home, as anyone could get their hands on the medicine. I strongly support assisted dying but I think it would be better done in the presence of a medical professional but these medical professionals should have the option of wether they want to take part in assisted dying. I also think that in the case of patients with dementia or other related illnesses, on Diagnosis they have an option to make an order for assisted dying when they may lose capacity in the future.
Agree	If someone is unwell with no cure what is the purpose of them living	Not Answered	
Disagree	I want to die a natural death. Not accelerated death.	Not Answered	Too many questions
	I want to be looked after well, live well till I die.		My response only needs one question!
Disagree	Unnecessary with palliative care, enabling no-one to be in pain.	Not Answered	
	Unethical with Doctor patient relationship to care and protect life and not to assist in the ending of life.		
	What may start as for adults with terminal illness, could quickly be amended to allow for elderly and those with disabilities, which is what has happened in Canada.		
	We have to protect our vulnerable.		
	I have known of people given a terminal diagnosis who have then gone on to live for many years, as much as twenty plus.		
Agree	I am pro choice, a person's life is their own and if someone wants to be free from pain and not burden their families they should be allowed to do this.	Not Answered	
Agree	We should have the ability to die with dignity, in a safe environment, under the supervision of medical professionals, where everything has been considered, where family members are aware of the persons thought process and decision.	Not Answered	
Agree	If someone is terminally ill then why should they and their family suffer any longer then they have to. They should be allowed to die with dignity when they feel the time is right.	Not Answered	The medication should be administered by a medical professional.
Agree	I believe that those in suffering should be allowed the freedom to free themselves of ongoing pain. Someone who is incapable of living a normal life shouldn't have to be put through more pain & suffering unnecessarily.	Not Answered	
Agree	It is no life for them to keep on living and if that's their wish it should be able to do	For over 1 year	

Disagree	It can be a personal choice for a few people with some rare conditions. I don't agree that it should be legally allowed.	Not Answered	I answered to say I disagree with the proposal. I then avoided all the other questions after that. Because I feel they were not written with impartiality. I think there is a big majority of people who disagree but keep away from taking part in this discussion! Stop assisted dying from becoming a law.
Agree	Patient autonomy is portrayed as vital in healthcare. It is therefore vital that patients are able to make informed choices regarding all aspects of their care, including a dignified death.	Not Answered	
Disagree	I believe the terminally ill should be provided the maximum palliative care, and that treatments to extend life can be refused. Allow a body to die in it's own time, with as much comfort as can be provided.	Not Answered	
Disagree Agree		Not Answered Not Answered	
Disagree	Mistakes could be made as happened with hanging. These mistakes can't be rectified	Not Answered	These questions are not applicable if you disagree with assisted dying Even with all these proposals in place the system is open to abuse
Disagree	As a Christian I do not consider I have a right to terminate my life, and it could become an easy way out for eg: a depressed person to take. It could also reduce the wonderful medical advances in helping seriously ill, or old, persons to live out their lives. Once euthanasia is introduced the age is often lowered, as in Belgium, and if pressure is put upon a sick person they may feel that they have a duty to die, to relieve loved ones of the pressure upon them.	For over 5 years	As I do not agree with the process of Assisted Dying I have been unable to answer some of the questions.
Disagree	Legislation permitting assisted suicide or euthanasia is intrinsically wrong. Vulnerable groups will feel pressurised in cooperating. It will undermine the ethical base of nursing and medical care which commands that one does no harm. Sick or handicapped patients will feel that they will be better off dead with their estate being used by benihfcaries. Where laws have been changed to permit assisted suicide and euthanasia in certain situations have later been liberalised to allow for more permissive grounds eg depression & children	Not Answered	Legalising assisted suicide and euthanasia is morally repugnant. It is bad "medicine". Patients should be treated for their pain or other symptoms and should not be invited to take part in a "quick fix" which so called assisted dying will be. Getting rid of the patient may save money or resources but will create a shadow on medical care in hospitals and undermine proper medical care and the rightful status of any patient who should have appropriate medical attention for their disabilities
Disagree	Not interested as I am not worried about unknown hypothetical future illness scaremongering me! There are surely better and more important matters to deal with....	Not Answered	This is utter distraction from major problems facing the government Shocking
Disagree	I disagree nobody should assist in helping somebody to die they will die when our blessed Lord calls them.	Not Answered	
Disagree	How many people will benefit from this law? Should you not focus on problems affecting large number of people? You could make a difference in peoples lives. Please use your position wisely rather than going for glory.	Not Answered	After Q 8, every question is waste of time!
Disagree		Not Answered	

Agree	Any terminally ill adult, of sound mind, who is experiencing pain and suffering, should be allowed the choice to end their life in the manner and time of their choosing. No-one else has the right to prolong an individual's life if continuing to live were to cause them immeasurable physical and mental suffering.	For over 5 years	I think an individual should be given the option to allow for a doctor/healthcare professional to administer any end-of-life medication
Disagree	We simply do not need this in the island.	Not Answered	90% of the questions are biased. I didn't think I should answer them.
Agree	Agree in principle but the definition of assisted dying and the supervision thereof requires clarification. The real definition which no one appears to want to state is that of Voluntary Euthenasia. This requires medically administered drugs by a doctor to end a patient's life. I have personal experience of the Dutch system which is strictly administered. It is worthy of investigation as it is a working system. Application has to be made and approved by two doctors and it is too detailed to describe here. Also, one does not have to be terminally ill to want to die. Unbearable pain where no drugs work, including strong morphine etc., will also be a reason for termination. Some conditions linger on for years with no quality of life but are not defined as terminal. Thus life expectancy is not of major consequence in this case. Question 9. which follows does not provide a possible response of "No", which softens the argument.	For over 1 year	See No. 8 Comments. 21. requires a "No" option as is the case for 20. 22 to 24 All medication must be under the control of and administered by a doctor. The patient or a representative should not be involved under any circumstance. This is not a matter for a prescription to be issued to a patient, it must be doctor initiated and controlled through to the end point. This should be properly planned and ideally should be in the form of a self administered drink to be taken by the patient. Where this isn't possible intravenous sedation / injection should be given. Doctors may not be the best option for the insertion of an IV line, a qualified nurse or paramedic might have to be called in if needed. The objective should be for a controlled and dignified death.
Agree		Not Answered	
Agree	Through my work, I have seen many people and their families go through their end of life care. So many people have commented on how they would want to end their suffering sooner. The End of Life stage for a lot of people can be protracted and distressing for all involved. Individuals should be given the opportunity to choose when and how they die/	For over 5 years	
Agree	I have seen and am currently watching a loved one die slowly with only pain killers and in a state they hated not being able to do anything at all for themselves. I know this person would much rather have things in place for them to not have to go through this. I would be prosecuted if I put an animal through this.	For over 5 years	I would rather have a living will in place in case I wasn't capable of making my wishes clear at the time or be able to make this decision myself if I had a terminal diagnosis. I would not want my relatives to watch me go through a slow, painful and undignified death. This does need to have controls in place but should be available to anyone who needs it.
Disagree		Not Answered	
Agree		For over 1 year	
Disagree	No-one has the right to take another person's life.	For over 5 years	I do not agree with the proposal in any form. Thank you

Disagree	Our palliative care is excellent and I believe that someone can die with dignity without speeding up the process. It also concerns me that the criteria that someone needs to fulfill in order to access assisted dying would gradually become less stringent. There is evidence from places that have legalised assisted dying that their criteria for someone who qualifies for an assisted death has almost never stayed the same. The criteria has become less stringent therefore widening the net for those that qualify for an assisted death. This concerns me, it will become harder to safeguard the vulnerable when this begins to happen. It feels like this is a slippery slope. Our healthcare providers primary objective is to save and prolong life, I feel this goes against that direct objective.	Not Answered	I am really surprised at how bias this consultation seems to be. There are many questions on here that assume you are in agreement with this bill, therefore answering these questions would give the appearance you agree when in fact I do not agree with the passing of this legislation.
Agree	It will be more humane and caring to permit assisted dying than to prohibit it.	For over 5 years	
Disagree	> Palliative care should be improved and additiona; Government funding allocated > I believe fom the experience in other jurisdictions that the legislation and controls will be progressively weekened and it would become legalised suicide. > Several medical qualified friends and Doctors I haev spoken to are strongly against the prioposal and see it as a violation of the ethic of their profession.	Not Answered	The consultation appears unbalanced with a presumption that Assisted Dying shou;d be introduced in some form I oppose this on ethical principles. I do not feel that vulnerable people can be protected from external pressure or financial interests and this would lead to individuals complying for external reasons.
Disagree	The survey seems pointless if the bill is going to brought to Tynwald anyway. If the member is honest and sincere he should follow whatever the outcome is. In any case, it is imperative for fair and open discussion to take place.	Not Answered	I cannot but think that this is a stictched up survey! I hope I am wrong.
Disagree	I believe this proposal could be misused, especially for elderly people who are in care homes, where the family may grudge paying for end of life care and might encourage family members to ask for assisted dying.	Not Answered	I have heard, with horror, of the way things have progressed in Canada since assisted dying was introduced there and that there is now very little access to palliative care such as we have here in Hospice and in end of life care at home. Apparently disabled children can now be given assisted dying measures..... are we returning to the world of the Nazis?
Agree	Everyone should have the right to choose and it probably should extend to beyond terminally ill. Better people have a choice than take the matter into their own hands. As long as it's clearly an individual's choice and there is no evidence of being coerced into the decision.	Not Answered	It must be recognised that not all health staff will be comfortable with assisted dying and they must also be free to choice to/not to participate. Extending to non residents could enable the Island to offer a potential commercial service (similar to Dignitas) given it is not available elsewhere in the U.K.
Disagree	I feel that once the law is in place it could be expanded in the future, leading to manipulation of vulnerable adults. Doctors sign an oath to help preserve life, not to destroy it. Hospice help many patients who are dying and I think the government would be better off supporting the palliative care that is given by Hospice than supporting assisted suicide.	Not Answered	Vulnerable people have a right to live without being manipulated by the family to die because they are a burden, or because the family wants their money or property. What will happen to people with dementia? I do not approve of this Bill
Disagree	Feel if permitted it could spiral out of control, and , is not needed as palliative care is available.	Not Answered	

Disagree	<p>I believe this proposal is unethical because it fundamentally changes the role of healthcare professionals, which has always been to support patients to live as well, and as comfortably, as possible until they die naturally, not to deliberately and prematurely bring about their deaths. This will erode the principle that all lives are valuable and worth living.</p> <p>There is a danger of vulnerable people feeling under pressure to end their lives prematurely for fear of being a burden on others. Experience from other countries shows this to be a reality. We have a duty of care to these people which will be undermined if caring encompasses killing.</p> <p>When healthcare professionals in all sectors are swamped with work, it is wrong to add this additional burden. Resources should rather be provided to improve the care which can be provided. Those who object to participation on religious and moral grounds will be put under increasing pressure making it difficult for them to continue in professional practice. As with existing legislation to which some may object, the “conscience clause” would seem to expect an objector to refer patients to another professional who will provide the “service”. However, if I firmly believe that this is not an “appropriate medical treatment or service”, I believe it is fundamentally wrong for anyone to provide it, not just myself, and should not be obliged to refer.</p> <p>The proposal is uncontrollable; “safeguards” in the proposed legislation can easily be eroded. Evidence from other countries that have followed this path show how quickly the scope of the legislation can be broadened. Equality laws can easily be used to justify giving access to other groups not included in the original proposals.</p> <p>The proposal is unnecessary in a country with world-leading palliative care. If there are patients who are still not able to access appropriate treatment,</p>	Not Answered	<p>I have left several questions blank because they have been constructed in such a way that any response could be seen as supportive of the principle. This consultation process is flawed and appears to be prejudiced in favour of a positive response for supporters of this change.</p> <p>As a retired pharmacist I have concerns about the doses required to produce death and the methods used to administer them. Some of the suggested methods of supply could lead to uncontrolled large quantities of lethal drugs circulating in the community.</p> <p>There is no reliable way of producing a peaceful and painless death either orally or intravenously when the body is not biologically ready to die. Medicines are not licensed for this process and so not available in the doses necessary. The established methods of providing assisted dying oral medication require massive overdoses of a combination of drugs, in some cases hundreds of tablets which have to be swallowed within a very short period of time. These do not necessarily lead to death quickly and can have extremely unpleasant side effects. The trauma of this kind of death can result in difficult bereavements for those left behind.</p> <p>Conversely, proper palliative care with the skills developed by the hospice movement can produce a good and dignified death when the body is ready.</p> <p>The existing legislation should be left as it is and efforts made to ensure equal access to palliative care services for all Manx people.</p>
Disagree	<p>I do not agree that we need assisted dying on the island.</p> <p>Not in any form.</p>	Not Answered	<p>I do not agree that we need a law on this. Current law on killing another person is sufficient and clear. There are many other ways people with terminal illness and rare situations can seek help and support.</p>
Agree	<p>It depends on each individual to have a choice for assisted dying or not.</p>	For over 5 years	<p>More conversations should take place on dying. I personally would prefer palliative care to assisted dying. Palliative care should be highlighted to better inform people rather than resorting to assisted dying.</p>
Disagree	<p>I do not believe that the information is shared openly and honestly at the moment on this matter.</p> <p>I do not believe that the island is ready and safe for this proposal to become a law.</p>	Not Answered	<p>I think that we need to study the countries around the world to understand how it is helping people in distress. How many people were killed who would have otherwise lived a comfortable and fruitful life? Is one life taken away needlessly worth more than dozen lives in pain? Or is it other way around? There is more to the moral maze than it is made out at the moment.</p>
Agree	<p>Assisted dying within a legislative framework should be an option for people with terminal illness</p>	Not Answered	<p>Some people who want assisted dying may not be physically able to take the medicine because of swallowing or hand mouth coordination eg motor neurone disease sufferers. There should be provision for medicine to be injected too.</p>
Disagree	<p>It would be dangerous and ruin the quality of Palliative care on the island.</p> <p>It would have all sorts of unintended consequences.</p> <p>Many people would misuse the law if it was passed.</p>	Not Answered	

Disagree	Every jurisdiction that permits 'assisted dying' begins with the terminally ill, but then, inevitably and inexorably, extend the criteria for permission. Supporters of 'assisted dying' are open about what they call a "right to die". Rights are, by definition, universal. You will not be able to ;limit the use to the terminally ill.	Not Answered		As 'assisted dying' contravenes every medical commitment over millennia, the right of doctors, nurse and other staff to remain completely separate from any involvement should be enshrined in law.
Disagree	Having witnessed family members who have reached the end of their lives in the care of Hospice I feel that this is a much more appropriate and humane approach which does not require someone’s life to be terminated but to end in a natural way! If you want to look at the countries providing “assisted suicide” their systems have all led to a huge increase in deaths with many not of the terminally ill! Here on the island we are rightly proud of our way of life and outsiders are encouraged to visit here for the many attractions but Racing Capital of the World could so easily be overshadowed by a much grimmer title!	Not Answered		Most of these questions are assuming that Assisted Dying is agreed with by the person filling in this form so therefore this form is biased and is not fit for purpose in my opinion. Instead of putting lots of money into Assisted Dying, more money should be put into improving NHS care of all patients and hospice type care given to all those who need it to ensure they are given the best end of life care!
Agree	I do believe that it is not always possible to offer death with dignity, and so I truly believe that faced with a life, limiting or terminal illness we should have the ability to discuss the quality of our daily life and have the opportunity to make a decision that the quality of life on a daily basis is no longer able to be continued with .	Other	As long as they are registered to a Manx Gp service	
Agree	Quality of life is a big factor, some people have poor quality of life and want to end their suffering. Some elderly will openly state they don't want to live any longer or I wish you would put me down. It's also a lot safer to do it professionally then trying to end your life in your own way.	Not Answered		
Disagree	It is extremely sad to say this but I do not have trust that legislation couched in terms which essentially give power to determine to doctors will always mean a fair, considered, carefully assessed judgement is made by professionals in every case. Also I am pretty wedded to the Hippocratic Oath in its simplest form. Clever academic arguments can be made I realise to tune into the modern world of now but much of this is fashionable thinking with a relatively short span in the greater scheme of living it is a question of trust and that is in short supply today in nearly all walks of life.	For over 5 years		I have answered the questions above to help with thinking if the bill goes ahead into draft form although I am personally opposed to it for the reasons stated at the outset. I would prefer families to understand the options of palliative care available to them both within a hospice and at home. Essentially an individuals final days are carefully managed and I subscribe to the words of Dame Cecile Saunders explaining this when she founded palliative care provision and the hospice ethos.
Disagree	I believe this is a matter that should not be legislated for. Some matters are best NOT legislated for. I strongly feel that the views, and the wisdom, of palliative care consultants should be listened to, not least our own palliative care consultant at Isle of Man Hospice. Please listen to those views. I feel this is a dangerous road to travel which will become impossible to safeguard, ie with inevitable challenges to the initial legislation. A person with severe depression could argue that their suffering and life expectancy is no less than with a physical disease. I feel that the old, the sick, the frail and the poor will feel pressure to end their lives - even an expectation to do so. I fear this will ultimately become the ‘new norm’.	Not Answered		

Agree	Having had relatives who have passed away with drawn out terminal illness and/old age, to watch them suffer greatly with no other outcome than death, it would have saved prolonged suffering for them and something they had wishes was available to them.	For over 1 year	
Disagree	Hospice provide the terminally ill with a pain free, comfortable end of life. Even with terminal illness people still have life left to live, I believe being ill doesn't have to lead to a quicker death than necessary. The sick maintain their dignity with the help now provided. With experiences of being told people will live 6 weeks and have continued living for several years, the thought of people choosing their end when able to enjoy their last years seems to me to be a sad shame.	Not Answered	
Agree	I wholeheartedly agree, that terminally ill adults should have the right to choose whether or not they want to end their life.	Not Answered	
Disagree	I believe that even though all options may point to giving up, that people can still find quality of life until it is their time to pass. I have heard stories of people who would have been a potential candidate for assisted dying, and they have still been able to find joy and happiness in their final years, months and days. Life is precious and it shouldn't be given up on.	Not Answered	
Disagree	We have brilliant palliative care on the Isle of Man. There is no need to end any persons life.	Not Answered	No one should be allowed to end another person's life. We have great care for our sick people, palliative care keeps people above pain until their natural time to pass arrives.
Disagree	My father died in my own home from a prolonged terminal illness. He had the benefit of adquate palliative care, did not request any assistance to end his life prematurely, and died with complete human dignity. To have suggested to him, or pressured him to consider, assisted suicide would have constituted a callous and selfish act on my part which, although it would have curtailed my own sadness and discomfort at seeing him deteriorate, would have robbed him of a natural and peaceful passing away, surrounded by his loved ones.	Not Answered	<p>I think it is a crying shame this topic has even been suggested.</p> <p>1) The proposed legislation would leave vulnerable people subject to pressure from family, friends and potential heirs, to request assisted suicide.</p> <p>2) There is a strong likelihood that the extent of the proposed legislation will creep upwards - e.g., it could apply to the terminally ill today, the disabled next month, the mentally ill next year, etc. This progression has already been observed in other countries that have legalised assisted suicide.</p> <p>3) Ethical dilemmas would arise for medical professionals such as doctors, nurses and pharmacists. Would they be able to conscientiously objectwithout any personal or professional repercussions?</p> <p>4) Other ways in which the extent of the proposed legislation could creep up are: a) an extension of its initial applicability to residents only to later incude non-residents as well (i.e., "suicide tourism"); and b) applicability progressing from adults only to a later inclusion of minors.</p> <p>5) The proposed self-administration of life-ending drugs carries a risk of incorrect administration, or a last-minute change of heart, resulting in dangerous drugs circulating in the community.</p>

Disagree	I see it as assisted suicide.	Not Answered	I am 100% against this proposed Bill.
	As a Christian I believe that no one should have the right to assist in shortening someone’s life.		By all means use palliative care, not this, ie not euthanasia or assisted suicide.
Agree		Not Answered	
Disagree		Not Answered	
Agree		For over 1 year	
Disagree	We didnt come here by choice, life is given and and it will be taken away by the one who gave it. Assisted dying equals murder, it is trying to interfere in the span of Life given. There is already enough provisuon in the end of Life care and any interfetence equals crime.	Not Answered	It is morally unacceptable. It is murder and contrary to the dignity of the human person.
Disagree	Life is a gift from God. If we can't give life to someone, we have no right to end someone's life.	Not Answered	
Agree	I believe that we should have the right and ability to choose how and when we may wish to end our life, particularly without implicating others.	Not Answered	
Agree	After watching a very close relative receive end of life care. As amazing as the nurses/hospice/drs all were it was such a traumatising and emotionally challenging time we went through as a family. I would hate to have to go through it again. To watch someone you love go through end of life and watch them suffer and be in pain, when you could take all that suffering and pain away by helping them pass much easier and peaceful.	Not Answered	
Disagree	The aim of science and technology is to promote life, not to destroy it. Ending someone's life can create a negative psychological impact on the society and especially among younger generation.	Not Answered	

	<p>Disagree Euthanasia or assisted suicide will become a slippery slope from what is deemed “terminally ill” to eventually the “disabled”, “mentally ill” and ultimately anyone who is deemed a “burden” to society.</p> <p>In my line of work I have come across many people who at one stage have either wanted or attempted to commit suicide, for many reasons. From that the vast majority of these people have decided to not go ahead with suicide either just before or whilst carrying out the “final act” following that have gone on to live fulfilled lives.</p> <p>This bill also brings questions about the ethics and conscience of doctors and healthcare professionals, potentially leading to “doctor-shopping”. We also live in a country where even basic healthcare far surpasses that which is available to over 50% of the world’s population and where palliative care is phenomenal, the thought of which is not even plausible to some countries around the world.</p>	<p>For over 5 years</p>	<p>How is someone deemed to have capacity, if it is that a psychiatrist is required to assess certain people due to circumstances surely everyone wishing to go through with euthanasia or assisted suicide should be assessed by a psychiatrist?</p> <p>If this bill was to be passed where would boundary be? It would eventually lead to pressure, both externally or internally, on patients, from family members, the government and organisations to accept euthanasia or assisted suicide as a way to cope with or put an end to the increasing pressure and strain; whether that be financial, emotional and physical that may come from having a terminal illness. This then becomes a way to free up beds and removes the humanity from healthcare. We need to be protecting the vulnerable.</p> <p>Where does the funding come from for these drugs used in the assisted suicide and euthanasia? Is it taxes and public funding and does that mean that the same money that is being used to save so many lives is being used to end other’s? Which could potentially be against their will, which is ultimately murder.</p>
	<p>Disagree It is a sin to take a life. It shouldn’t be allowed for any reason.</p> <p>Disagree The legalisation and endorsement of assisted suicide is both unnecessary and dangerous.</p> <p>On the question of it being unnecessary, we have world class palliative care, and we should do everything we can to value life and death, and give the hospice sector etc. more support and resources.</p> <p>Over time, as is seen in other areas of social policy, the restrictions are gradually relaxed, and there are any instances in other jurisdictions of it being applied in ways that the original legislators had not envisaged.</p> <p>Proponents of assisted suicide often make the argument that we put down our pets out of compassion - surely we should enable a higher level of compassion for people. But that is precisely the point. We put down our pets not just because they may be suffering, but because they have become too much of a burden (e.g. becoming incontinent), or expensive to care for (vets bills etc.)</p>	<p>Not Answered</p> <p>Not Answered</p>	<p>This is a very biased consultation. The terms of reference for this consultation have the wrong starting point. As a consequence, over half of the questions are based on the assumption that the proposals are endorsed. Why does the consultation not give more weight to the fundamental question as to whether it should go ahead or not?</p> <p>Instead, it asks questions only about how it should be implemented.</p> <p>Moreover, the document which accompanies this consultation is extremely one-sided. It gives lip service to the fact that opinions are divided, but then goes on to give only one side of the arguments, for example by citing evidence of how it works safely in jurisdictions that have adopted it, ignoring evidence which paints a different picture.</p> <p>I note that the Island Global Research document referred to in the preamble to this survey tries to give a balanced view, e.g. by summarising on page 22 the views of those who opposed the principle as well as the views of those supporting it. Very shamefully, the preamble to this exercise does nothing of the sort.</p> <p>I also understand that the whole exercise is under the control of Dr. Allinson who is clearly a supporter. Why is it not being carried out by an independent body?</p> <p>I am very disappointed by the process, and I fear that the consultation is for appearance sake only, and not a genuine opportunity for debate and discussion which will have an effect on the outcome.</p>

	<p>Disagree I believe that the risks of unintended consequences is too serious to ignore.</p> <p>It has been shown in other countries, eg Canada, Netherlands, that original safeguards are amended or extended so that ultimately, the original criteria for assisted dying are eroded and vulnerable people are exposed without protection.</p> <p>The definitions of various criteria are vague and could easily be interpreted in such a way as to include those who have no desire to end their lives but are unable to express this.</p> <p>The risk of coercion of vulnerable people is very high and it is my belief that many people could be pressured into agreeing to a premature death out of a feeling of being a useless burden or wanting to release their family/carers from this burden.</p>	<p>Not Answered</p>		<p>I feel that this consultation is premature, when there has not been a consultation to address the fundamental principle of whether there is actually strong support for assisted dying on the island. The survey mentioned does not constitute a sufficiently robust perspective to base the Bill on; it consisted of around only 1% of the population, a self-selected cohort with no focus groups or other in-person discussions. 78% of the respondents supported a referendum on the question as to whether there should be assisted dying, yet this has not been acted upon or even mentioned.</p> <p>The Bill has many areas which are open to abuse in the future. It is the proverbial ‘thin end of the wedge’, either unintentionally or indeed intentionally.</p> <p>A better use of time, finance and energy would be to prioritise further funding and developing palliative care on the island, so that no-one need suffer or fear death when it comes.</p>
	<p>Disagree It is a sin to take a life</p> <p>Disagree No to mercy killing</p> <p>Disagree 1. The terminally ill risk feeling obliged to request assistance to die a) in order to avoid being a burden on their family and/or b) if they are under pressure to do so from unscrupulous family members who hope to benefit financially from their death or c) simply because it's an option.</p> <p>2. Providing the terminally ill with good quality palliative care shows kindness and respect for them and their lives. It shows them they are worth looking after, rather than simply killing them or enabling them to kill themselves.</p> <p>3. In Canada in 2016 assisted dying became legal if a person's death was "reasonably foreseeable". Canada has now voted to make it available for people with mental illness, although this law has yet to come into effect. There are even calls to allow euthanasia for disabled babies up to the age of one. Where will it end?</p> <p>4. In Belgium in 2002 euthanasia was allowed only for adults, but in 2014 the law was widened to include children, with no lower age limit!</p>	<p>Not Answered</p> <p>For over 1 year</p> <p>Not Answered</p>		<p>No to mercy killing</p>
	<p>Disagree In other countries assisted dying has been gradually extended to other types of illness.</p> <p>It will damage doctor/patient relationship.</p> <p>People could be coerced into agreeing to end their life, the vulnerable particularly.</p> <p>We have excellent palliative care in the IOM</p>	<p>Not Answered</p>		<p>As mentioned in no No 8</p> <p>We have good palliative care & an excellent Hospice in the IOM</p> <p>Trust in doctors will be eroded,.</p> <p>People could be coerced into consent for assisted dying, especially the vulnerable</p> <p>In other countries who have adopted assisted dying, it has escalated to include many other categories of illness.</p>

Disagree	I do not wish assisted dying available on the island. Thanks	Not Answered	I strongly feel that all questions are one sided. No assisted dying on the island with any modifications.
Disagree		Not Answered	
Disagree	I am disappointed to see how the questions in this consultation are biased so that giving any answer to many of the questions gives tacit agreement to bringing in the new law. I believe we should care for, support and ease the suffering of 'terminally ill' people. We now have more advanced understanding of palliative care, with hospices, Hospice at Home and the palliative care team always available. The option of assisted dying has the potential to steal palliative care budgets, make suicide more 'normal', put pressure on vulnerable and disabled people, introduce lethal medicines into the community and put pressure on healthcare staff to go against their consciences and help to end life rather than caring and supporting people. I see that in other countries, an initial change in law has been followed by erosion or compromise of the safeguards originally in place. E.g https://www.lemonde.fr/en/opinion/article/2022/12/04/assisted-dying-what-is-seen-as-an-opportunity-by-some-has-become-an-urge-to-give-in-to-despair-for-others_6006522_23.html	Not Answered	I have many concerns about the proposal to provide assisted dying: We would be helping people to commit suicide. We would be paying healthcare staff to kill people or help them to kill themselves - their vocation is to heal, support or alleviate symptoms for sufferers. It is open to many dangers if lethal 'medication' is in homes or in transit from a pharmacy. Countries where Assisted Dying is allowed show that once legislation is in place, changes to the permissions regarding ages, symptoms, mental state etc may more easily follow. Conscience clauses are also subject to change if new policies become embedded or are in place where staff are limited and pressure is increased. Pharmacists would potentially be under increased pressure to be involved. The budget for end of life care could effectively be split between Assisted Dying and the palliative care provision, with money pressures potentially tipping decisions. https://ehospice.com/editorial_posts/the-impact-of-assisted-dying-on-hospices-and-palliative-care/
Disagree		Not Answered	
Disagree		Not Answered	I say NO to assisted dying Please assist us to live well
Disagree	Assisted suicide	Not Answered	
Disagree		Not Answered	Talk about Pay rise to public sector workers
Disagree	Assisted Dying is unethical - it would deteriorate the necessary trust that all of us benefit from historically through a successful doctor-patient relationship. Doctors in the very nature of their profession are to help protect and heal. It is also unnecessary - my own experience has shown me that when family members are terminally ill, every minute you spend with them is valuable, even if your relationship is radically altered due to the nature of their condition. This is particularly important in the months and years of grieving following a loved ones death. The impact on mental health for family members whose loved ones have had an abrupt 'assisted dying' death should not be overlooked. The importance should instead be placed on ensuring that palliative care is the best it can be and accessible to all so that as an island we can treasure every minute of life we are given. Assisted Dying is also a slippery slope - in countries where it is currently lawful such as Canada, the benchmarks keep shifting from terminally ill, to chronically ill and disabled to mentally ill etc. It would appear it is an almost uncontrollable decision with uncalculatable repercussions for society.	Not Answered	I feel many of these questions are misleading and biased in their outlook and this consultation should be drafted by an independent body. There are too many loop-holes in legalising Assisted Dying which place vulnerable people and those in the medical profession at risk. I would also like to add that the proposals for people to collect their own drugs from a pharmacy and store them at home is totally unwise. It would be considerably dangerous for lethal unregulated doses of drugs to be in people's homes and/or circulating in the community. Permitting Assisted Dying based on life expectancy is not medically sound. It is notoriously difficult and often inaccurate to predict life expectancy.

Disagree	Unethical. Eg doctors rights in addition to doctor - patient relationship. Unnecessary due to the excellent palliative care that should be more readily available and has been proven to be dangerous to the most vulnerable in society.	Not Answered		I feel the majority of these questions are misleading and biased in their outlook. It would therefore be prudent that this consultation should have been drafted by an independent body. With so many loop holes in legalizing assisted dying, it places vulnerable people as well as medical practitioners at serious risk. Permitting assisted dying on grounds of life expectancy is medically unsound. It is notoriously difficult and often inaccurate to predict life expectancy.
Agree	I believe that everyone has a right to decide their own fate; so long as the individual has declared their wishes from a rational and sound mind	For over 5 years		I understand that there are (quite daunting) questions surrounding this topic, including whether someone could be coerced into taking the medicine. However, when it boils down to it, I think there are ways to ensure that the assisted dying request is met with proper checks and due diligence, as well as the right amount of support for alternative options, to ensure that this is offered to those in need in a practical and dignified way.
Disagree	Death is real. everyone is going to die. why you are whipping up fear of unknown suffering? got nothing better to do as a doctor or as MHK? do something useful something life changing to poor people raise teachers pay nurses pay	Not Answered		no all questions after 8 is wasted
Disagree	there are better things in life than talking about death i do not agree with the proposal which is so one sided and unnecessary	Not Answered		focus on economy forget about this fringe problem affecting handful
Disagree		Not Answered		
Disagree		Not Answered		
Agree	I believe that terminally ill adults should be able to make a decision to end their own lives, subject to certain safeguards. The safeguards proposed in this consultation appear reasonable to me based on the comparisons made with other jurisdictions. I also believe that adults that have a condition which causes unbearable suffering that cannot be alleviated by other means should be able to make the same decision, even if they do not have a terminal diagnosis. With advances in medicine and palliative care, I think it is important to have assisted dying available as a option for individuals who may have a poor quality of life due to their illness or condition.	Other	I do not believe they should have to be permanent residents of the Isle of Man.	I have no other comments.
Disagree	Death comes us to us all. Why so worried about it? Live and let live. Don't kill people with fancy names.	Not Answered		help frontline workers sack managers
Disagree		Not Answered		survey seems biased.
Disagree		Not Answered		i dont agree at all
Disagree	no no no	Not Answered		discuss what common people want, not selected few want
Disagree	i dont agree with the proposal as it is short sighted dangerous waste of resources	Not Answered		many vulnerable people will be killed if this becomes law

Disagree	no not safe not for iom	Not Answered	questions are badly worded, one sided
Disagree	raise funds for palliative care attract health care workers retain good staff	Not Answered	i think there is scaremongering about how bad death is most people die peacefully why bother to change law for 5 people a year
Disagree	Life is a precious gift and I am concerned this will devalue life. I am concerned for the vulnerable, and those who may feel they are a burden to others. I feel that if Doctors are offering this as a treatment option, patients will feel their precious life it not worth prolonging, or has value. They may feel a burden on their families and also on health care system. I feel it is a gateway to widen its inclusion criteria as time goes on, which has happened in Canada to include mental and physical disabilities. Palliative care is excellent, and I feel this may hinder progress to better medications and treatment.	Not Answered	I would like to reiterate my concerns for vulnerable patient, those with mental health, dementia, and those with disabilities. Those who feel they are a burden to family members or on the health service. By suggesting suicide as a treatment option this is taking the value of their life away from them. By letting this go ahead it is a slippery slope to normalising suicide. We only need to look at Canada that has opened it up to people with mental health and disabilities and where will this stop. It is not our right as humans to decide, or put the idea of suicide to vulnerable people. It may make vulnerable patients feel the cost of palliative care should be spent on other areas of health care, rather than prolonging their own life, which upsets my a great deal.
Disagree		Other	I do not support mercy killing today and in the future.
Agree	I feel strongly that with the correct safeguards in place, assisted dying should be permitted for terminally ill adults on the Isle of Man, after watching my late mum and my father in law endure lengthy terminal illness, losing their dignity, their independence, their choice and STRONGLY SUFFERING pain, nausea, discomfort, immobility, fear, guilt, anxiety, depression and absolute horror through their impatience, knowing exactly what was happening.	For over 5 years	
Disagree		Not Answered	

Disagree	I believe that only one person has the ability to take life and any assistance in ending life before the allotted time is considered suicide, should this bill be brought in, it will cause issues in our medical profession where medics would need to intervene (or prescribe) the drugs needed. This also will cause issues with individuals life insurance and so consultation will be needed with this industry - and this would be for very few people in society. I do not want our island to become an Island of death. My own father had to hear his mother screaming in agony from cancer in the 1950's but had to allow the disease to take its course, today our hospice is able to allow a person to die well and pain free, rather than resourcing assisted dying I would have preferred to use the finances to support the Hospice who love people in the place they are at, treated with respect and allowed to pass peacefully. I am concerned that once the law is passed, it could then be changed to use against those most vulnerable in our community. (see the Canadian legislation). What keeps a patient safe from unethical medics.	Other	Over 10 years	Firstly I am very concerned over the bias of these questions - hence why many of my answers are missing for fear of adding to the yes debate. I feel this initial questionnaire should have only asked my yes or no to the basic principle and whether I was an island resident together with age group. The detail of this questionnaire is very flawed. I understand that medics at both the hospice and Nobles Hospital are not supporting this bill, and if it progressed may cause issues in us recruiting doctors for the living. I feel that should this progress that an individual would need to go through psychiatric assessment for some time, so that capacity and mental health can be assessed. Those in mental health crisis (or poor mental health) do not make good life choices. Individuals should be given access to Hospice where they are able to obtain treatment for their conditions and to be "treated well" compared to being in hospital which is a crisis situation - not a palliative place of treatment. Consideration needs to be made for our medical staff (pharmacists, doctors, nurses etc) and these individuals will need counselling support due to the burden of assisting a person in their suicide. I am concerned that there is a question that asks whether family members can obtain the medication and it can be stored at the persons premises until they want to use the drugs. This would mean that extremely dangerous drugs could be circulating on the "street" which could be extremely harming to the wider community or accessible to individuals in the home - which may be used on other individuals that the intended patient. There are many places around the world that others can travel to should they wish to end their lives, and I feel that if a person should feel that strongly about their situation, that there are many
Disagree	I dont agree in my beliefs we cannot take someones life only God can. I can give medication that will help the person ease and make them comfortable but never take someones life.	Other	Not sure	I dont agree at all
Disagree	A dangerous bill which I feel is unnecessary from a medical point of view.	Not Answered		
Disagree		Not Answered		
Disagree	The law change would be a slippery slope. Vulnerable people feel guilty and even ashamed. They feel they are a burden on society and their families. We need to have systems in place to help people live well and support them to the end not to feel a burden, useless and unloved. Very hard for doctors and healthcare to professionals whose aim is to preserve life. There are pathways in place to support the dying and their families. Hospice care is all about helping someone to die well and support their families. We do not need such a law.	Not Answered		If someone is terminally ill and dying, very often they are not capable of signing anything. Power of attorney for health and social care is designed to support and honour the person for whom you are protecting. If such a bill is passed this could be abused. Many questions I could not answer as they were biased towards accepting the bill.
Disagree	I have known of people who are terminally ill to recover or to suddenly have no more pain at all and to be able to spend good quality time with family and friends.	Not Answered		
Disagree		Not Answered		
Agree		For over 1 year		

Disagree	As may be seen in other countries eg Netherlands and Canada, despite being introduced with high standards, creep over time lowers the bar progressively to people who are depressed, hopelessly in debt, have physical disabilities. Christian teaching is that we are all made in God's image, to wilfully destroy oneself is to show contempt for God's creation, as such suicide is a sin.	Not Answered	Creeping "progressivism" and moral decline in society
Disagree	I am 100% against the proposal	Not Answered	Survey 100% biased in favour of assisted dying
Disagree	I have personally known of people to recover from a ‘terminal’ illness and also to be suddenly free from any pain caused by a terminal illness	Not Answered	
Disagree	Proponents of AD seem to ignore the warnings from other jurisdictions regarding the risks and dangers of AD. I am not comfortable with the proposal. I do not agree with Alison.	Not Answered	More evidence needed Legal system may not be robust on the island ever
Disagree	Countries that have adopted such laws seem to rapidly increase their scope including in the last few years there have been changes in Canada and Benelux countries (amongst others) to even make it available for mental illness. Such laws can radically transform cultures to reduce compassion for those suffering and give patients a feeling that they should 'do the selfless thing' and 'not be a burden'. Numerous disabled people have spoken out against such laws here and in the UK recently saying how they feel that at their lowest points they don;t feel they could have resisted the feeling that they should have utilised assisted dying. Laws are often blunt instruments to solve complex problems and the unforeseen consequences of this bill will be a question of life and death for the most vulnerable in our society, people we should be caring for and protecting.	Not Answered	

Disagree	<p>I believe there is no safe way to legalise euthanasia or assisted suicide. Changing the law will inevitably affect how vulnerable people view their own worth , and how they are viewed by others.</p> <p>People who have a terminal illness will feel under pressure to end their lives.</p> <p>True compassion means providing high quality palliative care for the terminally ill or the chronically ill.</p> <p>People with mental health problems, or suicidal thoughts, may feel pressurised to choose euthanasia at a difficult time in their lives, when they could have recovered with time and lived fruitful and content lives.</p> <p>Euthanasia and assisted suicide are not the simple, easy solutions to suffering they are made out to be. The cocktails of drugs given to induce death have not undergone rigorous testing. Painful complications can arise, and deaths are sometimes distressing and drawn out. Some people have taken over 100 hours to die.</p> <p>Legalising assisted suicide risks allowing unscrupulous family members with ulterior motives, such as financial gain, to manipulate elderly or sick relatives into killing themselves. It is hard for doctors to spot such coercion and abuse.</p>		Other	<p>I do not agree with allowing assisted suicide to become available, whether resident or not.</p>	<p>I will be praying that this Bill will not be passed. As Christians we are commanded by God NOT to take our own life, or another person's life.</p>
Agree	<p>It is wrong to prolong suffering of people who are of sound mind to request an assisted death.</p>	For over 1 year			
Agree	<p>If a person has a terminal illness and is mentally able to communicate their wishes, I strongly feel he/she should have the free choice to make this decision as he/she alone is experiencing the suffering.</p>	For over 1 year			<p>Regarding point 27, I feel an individual should be able to state in advance of their wish for assisted dying in the future. Not being permitted assisted dying due to mental incapacity is wrong if the person has previously stated, whilst being of sound mind, the wish for this to take place.</p>
Agree	<p>I qualified in Medicine in 1970, and worked in medical oncology for over 35 years. During this time the treatment of cancer has improved significantly, but there remains a significant number of patients whose cancer is terminal and distressing. Palliative care has also improved greatly and helps many of these patients have a pain free and dignified death. There will still be people who would like the choice of assisted dying.</p> <p>This proposal appears well thought through, with the relevant supporting evidence. I would like to see the bill passed so I can make an informed decision on my terminal care, which aged 75 may not be too far in the future.</p>		Other	<p>Patients receiving their care on the island. An example would be a Manx person who returns to the island for family support and care.</p>	

Disagree	<p>1. This is not biblical, God has a plan for you and although you've free will, this decision leads to sin and the wages of sin is death. God is the giver of life and the taker of it. This is self murder and murder for who ever helps facilitate this action.</p> <p>2. This is against the oath of any medical practice and flies in face of doing no harm.</p> <p>3. Anyone who asks for death can't be considered in a sound state of mind.</p> <p>4. Too much power given to people outside of the effected and the effected, this will lead to the system being taken advantage of.</p> <p>5. Consequences of giving doctors this responsibility will change how doctors are viewed, they will be considered judge/jury/executioner and no long someone who has sworn an oath to protect you, do no harm and strive to make you comfortable/better.</p> <p>6. This will eventually come down to money, money that family's want in greed and money that government do not want to spend on the ill in greed. Horrible as it sounds, this is where we will end up.</p> <p>7. People will age with anxiety.</p> <p>8. Divide family's.</p> <p>9. This will lead to inquests, litigation. finger pointing, community division</p>	Not Answered		This is a bad idea.
Disagree	<p>This is a very complex issue and not as simple as it would seem. I disagree because of what it might end up as in a few years. So called safeguards get eroded as has been the case in Canada in a space of around 7 years.</p> <p>Society will change and certainly our trust in doctors will. The slippery slope theory would soon be a reality.</p> <p>The elderly and frail could feel they are burdening others and people without capacity would just be disposed of. There is no capacity law in place yet so how can we even think of this.</p> <p>Finally we have a very good Hospice on the Island and hospice at home too. In Canada funding has been withdrawn from the Hospices unless they carry out euthanasia.</p>	Not Answered	<p>This Bill on the IOM if passed would have a detrimental effect on Society. Who would carry out this procedure if most of the doctors here are against it.</p> <p>I once heard a Church Minister say a few years ago that he would never support this as he had sat with families around the bedside of a terminally ill patient and heard their conversations and he was genuinely concerned about coercion at such a time.</p> <p>It's what it can lead to that is the problem. Homeless , poor and needy in societies where this is allowed are vulnerable. We need to be meeting the genuine needs of our society rather than killing people off because they're not able to function at the moment.</p> <p>The serious question too is that in Belgium and Netherlands minors are being offered this procedure too. Be careful what you wish for in this proposed Bill!</p>	

Disagree	Human life is sacred and once we enter into giving people an option to die we end up with a killing culture. Other countries which have legalised assisted dying have gone on to widely broaden the category of who is eligible, effectively legalising all forms of suicide. Also, the procedure for inducing death has not under gone sufficient tests and is not guaranteed to be safe or comfortable. And there is absolutely no way to ensure that people are not being coerced into choosing to die. Even by themselves they can feel a burden or make a hasty decision. A right to die would quickly become a duty to die. People who are ill need strong palliative care and reassurance of their worth, not a culture of getting rid of them.	Not Answered	Make all checks and precautions as rigorous as possible.
Not Sure	From my own point of view, I would not want to be kept alive if I had no quality of life, but I do worry about the system being abused.	For over 5 years	
Agree	<p>We have long supported attempts to legalise assisted dying in the UK and crown dependencies for adults who have made a clear decision, free from coercion, to end their lives and who are physically unable to do so themselves. In many cases, the person in question will be terminally ill. However, we do not think that there is a strong moral case to limit assistance to terminally ill people alone and campaign for a change in the law that would be responsive to the needs of other people who are permanently, intolerably and incurably suffering.</p> <p>In recent years we have intervened in support of our members Noel Conway, Omid T, Paul Lamb, and Tony and Jane Nicklinson, throughout their attempts to overhaul the law on assisted dying by taking human rights cases through the courts in England. We have also supported parliamentary attempts to legalise assisted dying.</p> <p>Humanists support the right of each individual to live by their own personal values, and the freedom to make decisions about their own life so long as this does not result in harm to others. Humanists do not share the attitudes to death and dying held by some religious believers, in particular that the manner and time of death are for a deity to decide, and that interference in the course of nature is unacceptable. In fact, advancing medicine means that we are now keeping people alive for much longer than would be possible if nature alone were to decide. This extends many people’s quality lifespans but can also lead to people suffering for longer. We firmly uphold the right to life but we recognise that this right carries with it the right of each individual to make their own judgement about whether their life should be prolonged in the face of pointless suffering.</p>	For over 1 year	<p>The entire process to provide assisted dying should be developed with the voices and experiences of people who are dying of terminal illnesses or who are incurably intolerably suffering. Their lived experience is vital in creating safeguards, systems, and processes that are safe, kind and compassionate.</p> <p>The Isle of Man can also draw upon the 27 international jurisdictions that have assisted dying legislation. Many of these jurisdictions have had legislation for many years. We suggest some safeguards in what follows.</p> <p>Written consent must be made by the individual and signed by an independent witness who will not gain anything from the individual’s death.</p> <p>Two independent healthcare practitioners must sign off that the individual meets the criteria on suffering, has the mental capacity to consent to end their life, and that all other options have been exhausted.</p> <p>A waiting period between the first and the final assessment of two weeks. This can be waived in extreme cases of pain and suffering, or if death is imminent. We know from international evidence that the rates at which individuals change their minds are incredibly low.</p> <p>Regulation by a special body created to provide oversight of the service. This body should be able to provide information and guidance</p>

Disagree	<p>This bill, I feel is unethical; it goes against a Doctor's hippocratic oath to preserve life, the doctors conscience and the doctor-patient relationship. If doctors are asked to assist in ending life, the trust built up over many years will inevitably be eroded away.</p> <p>It is unnecessary, as we have world-leading palliative care, in Hospice, and at home; as yet too many people have inadequate access to this service. This service needs to have better access for all.</p> <p>The law change is uncontrollable, e.g. Canada's euthanasia law has continued to change, from terminally ill, to chronically ill, disabled and mentally ill.</p> <p>Diagnosis of terminal illness timeline is imprecise, the longer the time frame gets, the harder it becomes to make an accurate judgement of how long a person has left to live.</p>	Not Answered	<p>There are many vulnerable people in Manx Society; these people are open to abuse by others, whether psychologically, physically, sexually or financially by others; these can be very hard to spot. The protection of our existing laws are there for a reason.</p> <p>The consistent message of Manx society has always been (and still is) all lives are valuable; we work hard to encourage people to choose life, rather than take their own lives.</p>
Agree	<p>8.1 We believe adults of sound mind who are either terminally ill or suffering intolerably from a physical, incurable condition should have the option of a peaceful, painless, and dignified death.</p> <p>8.2 Our position has been shaped by the testimony from their friends, family and loved ones. Many people on the Isle of Man suffer unnecessarily because of the current blanket ban on assisted dying. It is morally indefensible to force individuals to suffer.</p> <p>8.3 Central to the debate is the freedom to make choices at the end of life. People deserve the right to make decisions about their own bodies, their own lives and their own deaths. It is already understood that we have the right to make these decisions, as residents on the Isle of Man already have the right to refuse treatment, nutrition and hydration and there are no additional safeguards for making these decisions.</p> <p>8.4 Many people living with disabilities support assisted dying. Current legislation discriminates against them. Suicide is not illegal, and able-bodied individuals would be able to take their own life if they so choose, or travel abroad for help to do so, while some people with disabilities would be unable to do so without assistance.</p> <p>8.5 The existing options mentioned in 8.3 can lead to distress and suffering for both patient and family or friends, which means that those who wish to avoid that are forced to either pay over £10,000 for an assisted death abroad, a thoroughly unequal system, or they must take their own lives into their own hands. DIY suicides are often dangerous, can be unsuccessful and can be traumatic for families or friends. A study by the Office of National Statistics (Suicides among people diagnosed with severe health conditions, England: 2017 to 2020) shows that individuals who are diagnosed with serious illnesses are considerably more likely to die by suicide.</p>	Other	<p>My Death, My Decision recommends the same criterion regarding the assessment of residency for assisted dying services that are used to assess the eligibility for public-funded free health care services in the Isle of Man. A permanent resident is not defined in questions 13 and 14.</p> <p>My Death, My Decision believes that the process for applying and providing for an assisted death should follow the many proven international examples.</p> <p>An applicant should need to apply, in writing, witnessed by an independent individual with no potential financial gain from the individual, for the assisted death.</p> <p>The individual will need to be assessed by two independent doctors that they meet the eligibility requirements and are mentally capable. There should be a set waiting period between the two assessments, but this period should be waived for exceptional cases where death is likely between the two assessments.</p> <p>If there are any doubts about the underlying factors leading to the assisted death request, the eligibility of the applicant or the mental capacity of the applicant, they should be referred to appropriate additional assessments.</p> <p>In the majority of cases two healthcare professionals are all that is required and there should be no need to include any other prospective review, except where the assessors have concerns over motivations, eligibility or mental capacity.</p> <p>We recommend that a separate agency shall be established for assisted dying services on the Isle of Man. This agency should be able to provide guidance, information and support for people accessing</p>
Disagree	<p>Terminally ill people are vulnerable and often at the mercy of their carers. This opens up the doors for the cares and insincere family members/relatives to do away with their responsibilities.</p>	Other	<p>Some of the questions only make sense if someone is responding to support the bill.</p> <p>In my case, I do not support this bill and therefore I can't say yes or no regarding how assisted dying would be managed.</p>
Disagree		Not Answered	

Disagree	Living or dying can only be dictated by God, therefore I am totally opposed to this notion.	Not Answered	No. I do not support this proposal at all
Disagree	I disagree because I believe that once a change in the law is made, further changes could subsequently be made removing the proposed protections.	For over 5 years	I have deliberately left some questions unanswered because I do not wish to indicate support in any way for what I cosider to be Assisted Suicide.
Disagree	My religion does not support this idea. Only God can take away life.	Not Answered	I do not support this proposal.
Agree	Choice is paramount.	For over 5 years	
Agree	Having nursed both my mother and my husband (dementia & Parkinson's respectively) only re-enforced my views: they were both in terrible mental and physical pain which they themselves had wished to end. I have been a member of Dignity in Dying since 1992(when it was the Voluntary Euthanasia Society) I joined because I do not want my life to be artificially prolonged if there is no prospect of recovery and/or I am in pain. This strikes me as a kind of torture.	For over 5 years	
Disagree	I disagree for the following reasons. I consider this proposal to be legalising Assisted Suicide, which as far as I am aware is currently illegal in the Isle of Man. I do not think it is right to ask doctors to act against their primary aim 'not to hurt'. I beleive it would open the possibility in the future to extend the law to other categories as is happening for example in Canada. I also beleive it would create unacceptable pressures on medical professionals and dangers in the storage and delivery of dangerous drugs. I am also concerned that Government would be encouraged to reduce Funding and investment in palliative care.	For over 5 years	I have not answered some of the questions because I do not want to indicate any support for this proposed Bill and, based on the wording of the questions, I wonder just how independent this consultation can be. I am very concerned that all provisions should be debated and enacted together with no details left to subsequent decisions. I also have concerns about the possibility of dangerous drugs beling in circulation, and that economic and other pressures will be placed on health professionals in the event of their conscientious objection to participation. Do the proposers envision that the drugs will be provided at the patients request by the NHS? And if so is it the Governments intention to fully fund Hospice Palliative care as an alternative?
Agree	Dignity for the terminally ill person	Not Answered	Please do not let religious opinions get in the way of this important emotive subject. Animals are treated with more care love and dignity in our so called 'free world'

Agree	<p>I was born in 1940, and having seen individuals in pain with no way to get release, despite their wish to end their life in a humane way, I believe this should be made available to them.</p> <p>I have made a living will in which I request that, if there is little hope that I can have a meaningful life after illness that I do not want to be resuscitated.</p> <p>If I personally felt that my life at my age was not worth living I could commit suicide, and submit my family to unhappiness for their lives, they would live with wondering if anything that they had done had caused me to take my own life.</p> <p>If, having taken a decision to end my life but i was not physically able to do what was needed I could not ask for help as that would risk my friend/relative being charged for committing a criminal offense. I would just have to live a miserable life taking medication</p> <p>Without a change in our existing laws I would be compelled to live a life I wanted to end</p>	For over 1 year	
Disagree		Not Answered	
Disagree	<p>Vulnerable people may feel they have a duty to go down the route of assisted suicide if this legislation is introduced.</p> <p>Any intended safeguards will be quickly eroded, as in Canada and The Netherlands to name two.</p> <p>Health Care Professionals may well be excluded from being appointed to positions where they may be required to assist those who wish to have assisted suicide.</p> <p>The Isle of Man has an excellent hospice with the latest in palliative care available.</p>	Not Answered	<p>I object to this questionnaire being so biased in supporting the introduction of assisted suicide.</p> <p>Vulnerable people may feel they have a duty to go down the route of assisted suicide if this legislation is introduced, putting an extra burden upon the vulnerable.</p> <p>Any intended safeguards will be quickly eroded, as in Canada and The Netherlands to name but two. From the experience of other jurisdictions it is just not possible to stop widening the scope of the law.</p> <p>Health Care Professionals may well be excluded from being appointed to positions where they may be required to assist those who wish to have assisted suicide.</p> <p>The Isle of Man has an excellent hospice with the latest in compassionate palliative care available to all, with improvements being made all the time.</p> <p>A very dangerous precedent would be set in allowing lethal drugs to be in the community/home with or without regulation.</p> <p>Those in favour of the Bill may mistakenly believe that its introduction would be progress.</p> <p>I am totally opposed to any change in the law.</p>
Agree	<p>It is there body they should be able to choose what happens if they are sound of mind</p>	Other	From birth
Disagree	<p>unethical</p>	Not Answered	
Disagree	<p>It is in directed contravention of the Christian belief in the sanctity of human life.</p>	Not Answered	

Disagree	People who are "terminally ill" can, and many do, still live on for several years with a good qualify of life. Terminally Ill does not necessarily mean "in endless excruciating pain". However, once the terminally ill diagnosis has been made the patient can be put under pressure of many kinds, obvious and not so obvious, that make it seem they have a duty to die sooner rather than later. The pressure could come from the state to save money or from family members who stand to inherit, or even from NHS officials because the NHS is under pressure. The solution is good palliative care, not simply for the sick and vulnerable to die more quickly.,	For over 5 years	I feel that there are some loaded from 15 answer that seem to imply that I accept the idea of "Assisted Dying". I would like to make it clear the I totally oppose the whole idea. I do so because in all othe countries that have adopted this the safeguards have quickly been removed or are just disregarded. While there is life there is hope, and my hope is effective palliative care rather than and quicker death.
Agree	It's a personal choice	Not Answered	I think if all criteria have been met, there need not be stipulations on the length of a person's life expectancy, it's their decision and medical professionals should adhere to it.
Disagree	I believe terminally ill adults are best served by the established Hospice and community palliative care services here on the island. Our Clinical Nurse Specialists in End Of Life Care and Hospice Physicians are experts in the care of cancer patients and other terminal conditions. Knowing how long a patient has left to live is impossible to predict. Elderly, vulnerable and disabled people will feel massive pressure to accept " Manx sanctioned suicide" in preference to established, reliable palliative care. Personally, two of my relatives received excellent first class ,holistic care in the Hospice here.Physical pain management, psychological and spiritual needs were all generously attended too. Fantastic, loving support was given to family and friends.	Other	I do not support Assisted Suicide Legislation. Suicide migration/tourism is abhorrent.
Disagree	Firstly it is morally wrong. Secondly, as with so many new measures, once introduced there is frequently "mission creep" where the conditions that allowed the practice when the legislation was first introduced is expanded to broaden the application of the new measure. So it is likely that the definition of terminal illness will be broadened to include a wider range of conditions especially the ailments associated with old age. Any government has an incentive to encourage the broadening of conditions as a means of reducing the national medical and pension costs. Canada provides a good examples of "mission creep". When first allowed in 2016 people needed to be terminally ill, then the law was loosened in 2021 to remove the requirement for assisted dying to be reasonably foreseeable. Now in March the law will be loosened further to allow mental health to be allowed to be the sole reason to qualify for assisted dying. There is concern in Canada how this "mission creep" will impact disabled people. If assisted dying is allowed on the Isle of Man similar "mission creep" is likely to occur.	Not Answered	The Isle Of Man is attempting to promote a better concern for mental health and especially residents who are suicidal. This proposal for " assisting suicide" gravely contradicts the hopeful assumptions of standard psychiatric care. Palliative patients can frequently feel down and depressed. This demands proper loving care and support not a death wish solution. Doctor Assisted Suicide is fraught with dangers that the victim will have been coerced. Compounded by the situation that the patient is below par, confused or vulnerable. Manx patients deserve protection and Safeguarding , NOT state sanctioned killing! While researching countries who have Euthanasia/Suicide practices they all fall down the Slippery Slope and break their rules regarding compliance and documentation. Usually what begins as suicide for terminal illness deteriorates to include mental illness, then just weariness of life. A cruel eugenic solution we don't ever want on this island.

Agree	<p>I believe in the right of any individual, who is terminally ill and mentally capable, to be permitted to end their life with qualified assistance. This would stop having to commit suicide here or undergoing the ordeal of travelling abroad with or without assistance.</p> <p>Any partner/close family members would know and appreciate the individual’s wishes as would medical practitioners.</p> <p>If this law were to be enacted, the individual would have the comfort of knowing it was within their own power to make this lawful decision as to when and where. There would also be the relief of knowing their loved ones wouldn’t face any prosecution i.e. involvement in any assisted death which occurred before this new law.</p>	For over 1 year	
Agree		Not Answered	<p>See my answer to Question 10:</p> <p>The proposed Bill needs to be compassionate and allow medically assisted death to adults of sound mind who are terminally ill or intolerably suffering.</p> <p>This would give choice to those with incurable conditions who face years of constant pain or suffering that they find unbearable.</p>
Disagree	<p>Laws should always be for the welfare, health and safety of citizens. Every person is precious to God. Some of us have genetic diseases. A compassionate society will ensure that every person regardless of disability is given the support, care and help needed for life.</p> <p>We should hate war and the killing of others. Yet the assisted dying bill permits doctors and others to kill sick people. When in intense pain we may think life is not worth living but with love, care and compassion palliative care should be given to these vulnerable people. This may be costly, but we all at some time in life have needed care as babies and children. Then at the end of life terminally ill people may need extra care. This care has great value to ensure society does not become hard of heart and uncaring.</p> <p>Our thinking is wrong when we consider some people are superior because of their good health and achievements in education, careers and success in life, but we do not consider the bravery of the terminally ill and disabled who with the compassionate palliative care still contribute to society.</p> <p>Terminally sick children and adults with terminal illness have bravely raised money and awareness of symptoms so that research, charities and hospitals are able to give a better chance of recovery for others.</p> <p>Sadly other countries which passed laws to permit death for the terminally ill have gone down a slippery slope and now are including children, the depressed and anyone struggling with life and sickness to have assisted dying.</p> <p>Remember people who consider some as superior to others and decide they have the right by abortion and eugenics to put those they consider inferior to death. An inferior race was the reason for millions of Jews and others to be sent to gas chambers by Hitler and the Nazis.</p>	Not Answered	<p>It seems by all your questions this consultation asks about the way Assisted Dying should be regulated.</p> <p>Medics and pharmacists should not administer death medicines and if sadly this death legislation is passed should have the right of conscience not to prescribe death medicines</p> <p>How sad that we should pass legislation to enable someone else to administer death to another.</p> <p>We have forgotten God's health and safety laws. Do not kill.</p>
Disagree	<p>1. You are enabling people to commit suicide</p> <p>2. People may not be in the right frame of mind to be making a proper decision</p>	For over 5 years	

Agree	It's about personal choice but also about decriminalising the actions of anyone who, with the consent of the person concerned and in certain specified circumstances, acts in the interests of the person/patient to assist them to carry out their clearly defined wishes. Legalising this gives a clear structure and defines what is, and what is not, acceptable.	Not Answered	Unlike organ donation, which should be an "opt out" choice, assisted dying should be "opt in" so that assumptions are not made. It has to be a conscious choice which anyone can opt out of at any stage.
Agree	As long as the person is of sound mind and not being coerced then it should be the choice of a terminally ill person who can no longer deal with the hideous pain which can't always be dealt with by drugs to die. Someone very close to me was riddled with cancer and begged to die. He was terrified of suffocating as his lung capacity was failing on a daily basis. This unfortunately is how he died, suffocating and suffering terribly. His death destroyed his parents and wife who witnessed his death. He was only 41, had been an active sportsman who had never smoked and didn't drink, the choice should have been his to go with dignity, not in screaming pain.	For over 1 year	MHKs or anyone involved in the bill should not be involved if their religious beliefs sway their decisions. It is not about a supposed god and what people believe from reading a book, it's about compassion for a terminally ill person and their wishes. It should be dealt with objectively with impartiality and unbiased views.
Disagree	<p>Disagree.</p> <p>As an adult, living with a terminal illness, colon, liver and kidney cancer. I believe Committing suicide should never be legally sponsored by our Government.</p> <p>Our NHS and Staff should not be Committing murder, Or told to as part of their job, to take the life of anyone.</p> <p>And how much is all this going to cost the tax payers in the Isle of Man? This presumably is going to be funded from the NHS budget? Our NHS budget already doesn't have enough money to cover existing services.</p> <p>Where will this centre for the private members bill (euthanasia) proposer be built?</p>	Not Answered	<p>I believe that our Government should not support this private members bill, As I believe life is precious at any age and every age.</p> <p>Having been diagnosed with a tumour in my colon, Nobles hospital, September 2021, Following the successfully removal of half my colon, cancer was found in one of my kidneys, then inoperable cancer was found in my liver. My prognosis was two weeks to two months, Following discussions with oncology I choose to have chemotherapy. 10th January 2022 Clatterbridge Hospital said my cancer has been pushed back and is stable, this can continue for years. I celebrated my 73rd birthday December 2022.</p> <p>Our NHS struggles each year to stay in budget, so any additional costs to our NHS and the taxpayers isn't a good thing.</p> <p>Nobles hospital and Oncology are struggling, especially after covid, they need more money not less.</p> <p>Where will the millions for this private members bill be found?</p> <p>Where will it be built?</p> <p>Have we got the infrastructure at our Port and airport in place for these one way ticket holders from around the world to travel here or even the accommodation?</p>

Disagree	<p>My father passed away in the Hospice a few years ago, we knew he was going to die, he had been diagnosed with terminal cancer. The palliative care given to my Dad was beyond what we could have envisaged and the care for us as a family made the whole process less traumatic. I think we have wonderful end of life care here on the Island through Hospice and I really do not agree with making assisted suicide an option.</p> <p>We must protect the more vulnerable in society and I fail to see how bringing in a law of this nature could possibly do that, there will be some who slip through the net.</p> <p>I have read the leaflet distributed by Manx Duty of Care and to me, all of these are compelling arguments as to why this legislation should NOT be permitted.</p> <p>I think predicting life expectancy is a very grey area, we were told my Dad could live months or weeks, who is to say this prediction is right ?</p>	Not Answered		<p>I found some of these questions really uncomfortable given the death of my father. I just cannot see how assisted dying is of any benefit. I think it is an awful position to be in, to be facing a terminal illness. I believe if a bill like this came to pass, the individual with the terminal disease would definitely feel like a burden and this would give them added pressure to consider this as an option, in order to relieve the burden on family members, which I totally disagree with.</p> <p>Also the doctors, they are in a place of trust, who is to say what is right or wrong, and give them powers as to who should live or die before their natural time - no that definitely is not right.</p> <p>I have read several worrying articles on this subject, in particular to where this law has been passed and you can see that it is a slippery slope, and once it starts, whose to say where it will end?</p>
Disagree	<p>I would be too worried about how the law would be interpreted.</p> <p>My husband had dementia for more than 8 years.. Although he did not know his family during the last year and it was difficult to care for him, he did have some happy times, walking by the sea and listening to music. I think it affected me, the carer, more than him.</p>	Not Answered	Do not agree under any circumstances	<p>It is such a complicated area, I fear that it could be interpreted in the wrong way.</p> <p>I am in favour Do not Resuscitate orders on the express wish of each person., but not take a life under any circumstances</p>
Disagree	<p>I don't think that it is a good idea.</p> <p>I am worried that people will be killed by mistake and pressure from family etc</p>	Not Answered		<p>this is not an issue which affects majority of the people.</p>
Disagree	<p>As a Christian I believe in the sanctity of life from conception to death and that no-one has the right to terminate life at any point. I am extremely concerned for those who are vulnerable and unable to voice their wishes and for those who might feel pressure to end their lives because they believe that they are a burden to others. If we cease to endorse all life as valuable and worth living we lose the foundation on which civilised society is built. This bill is abhorrent and must not be passed.</p>	Not Answered		
Disagree	<p>Absolutely not.</p> <p>I do not want this on our island now or ever.</p> <p>i want to die peacefully at my own time. not forcing my way through with tablets and injections.</p>	Not Answered		<p>there is a lot of scaremongering and no evidence to support this proposal.</p>
Disagree	No	Not Answered		<p>never</p>
Disagree	we dont need it	Not Answered		<p>it is not needed</p>
Disagree	no evidence	Not Answered		<p>too emotional</p> <p>relying on fear factor</p>
Disagree		Not Answered		
Disagree		Not Answered		
Disagree		Not Answered		<p>Stop this non sense please</p>
Disagree	<p>once this becomes law, no one can control how it is used</p> <p>big no</p>	Not Answered		<p>all questions are biased</p>
Disagree	<p>why talk about death when you need to talk about health</p>	Not Answered		<p>focus on health</p>
Disagree	<p>no</p> <p>no</p>	Not Answered		<p>death will follow in natural time.</p> <p>Questions are badly onesided</p>

Disagree	I disagree as I feel even with safeguards allowing an option can cause people to feel pressurised to go down this route. I feel it can normalise this option and therefore put those who are at risk under pressure to make this choice. I especially feel this is the case for those who have no voice due to their illness and currently the supportive technology to give them a voice is not readily available on the Isle of Man. How can we guarantee these people are given the correct support to make a choice? In addition the mental capacity act is not in place and health professionals need training to ensure that they are aware of this bill. Will this be in place prior to this private members bill being introduced? Currently our palliative care system is charity funded with some funding from Government. Will the funding be guaranteed to be increased alongside this bill to ensure palliative care remains strong? By introducing this Bill we are not protecting our most vulnerable.	For over 5 years	
Disagree		Not Answered	
Disagree		Not Answered	wasted resources
Agree	I see no point in anyone suffering significant pain and/or losing ability to look after one's own personal needs, if there is no available, or likely to be soon available, relief - and the individual prefers to die.	For over 1 year	
Disagree	Life was given by God. No man has the right to take life, as we are just custodians of our lives not owners. I have seen many people who were terminally ill recover miraculously. So how can you determine the ones who will recover? why kill someone who may recover? I am 100% against assisted dying. It's not right to create an avenue for suicide	Not Answered	This proposed bill should be thrown out. It is unethical, ungodly, ultra vires and repugnant to human authority. No one should help another person commit suicide. It is actually murder to someone who cannot help/defend himself in sound decision making

Disagree	<p>I believe that assisted dying for terminally ill adults on the IOM will not be a good thing. People close to death, or with a life-limiting illness or condition, are vulnerable and it can be all too easy to manipulate vulnerable people to make a decision that is not in their best interests. But it would be extremely difficult to prove in a court of law that manipulation had taken place.</p> <p>It would also radically change (forever) the relationship between doctors and patients. Doctors have always been there to heal the patient. Any departure from that is unethical.</p> <p>Furthermore, despite the advances of modern healthcare, the prediction of life expectancy by healthcare professionals is extremely uncertain as repeated studies have shown.</p>	For over 5 years	<p>I believe that this consultation is highly biased towards acceptance of Assisted Dying. So many questions didn't provide the necessary answers to object outright to Assisted Dying (e.g. Question 9 regarding the limit of life expectancy did not provide an answer for 'Not all All'). Consequently, the consultation exercise should have been produced independently so that the questions and tick-box answers would not provide a bias. It is now all too easy to draw wrong conclusions as insufficient options have been provided.</p> <p>If Assisted Dying becomes law, then it will be all too easy to nibble away at the safeguards that may have been put in place by successive changes in the law.</p> <p>This law allows the life of vulnerable people to be removed, and therefore it is not in the common-good for the people of the Isle of Man.</p> <p>Significantly more funding should go towards palliative care and social care so that people are able to live as full a life as possible. This is currently a deep failing of the IOM government.</p>
Agree	<p>People deserve to be treated as adults at all points in their life where they retain the capacity to take the relevant decisions. A choice to end that life should not effectively be removed from them if they are not able, through physical circumstances or lack of access to the necessary means, to take steps for themselves which remain lawfully available to others who retain the necessary autonomy of action.</p>	For over 1 year	
Disagree	<p>There would be an un stated pressure or an assumed pressure on the patient in order to release their equity.</p>	Not Answered	<p>Most of the questions on this survey (9 onwards) assume that we agree with assisted dying and therefore what should the consequences be. I feel you have already made up your minds.</p> <p>I believe that life is sacred and it should not be in the hands of people to take it away.</p> <p>Unscrupulous individuals will undoubtedly use the law for their own gain by putting subtle pressure on the relative.</p>
Disagree	<p>Once assisted dying is made a law for the terminally ill, the criteria for recommending it quite soon broadens to allow those not terminally ill to have assisted dying. Palliative doctors and nurses are against assisted dying, as are the organizations representing the disabled, the elderly and mentally infirm. In Canada and in New Zealand for example the criteria used following the passing of the law, was quickly broadened and now allows those who are depressed, some homeless and in poverty, even veterans with post traumatic stress to use assisted Dying. Even talk of it being a money saver for government.</p>	Not Answered	<p>I have not answered a number of the questions as I strongly disagree with any form of assisted dying.</p>
Disagree	<p>As Christians we can't take life away from ourselves; it's given by God and there are ways to deal with pain and sickness.</p>	Not Answered	

Disagree	<p>Vulnerable persons may be pressurised or coerced into making decisions about ending their lives.</p>	Not Answered	<p>This questionnaire assumes, wrongly, that the options related to assisted dying are acceptable in whole or in part to the person completing it - however, as I am 100% against the whole proposal of assisted dying, for the reason I made earlier, many of the questions are 'non applicable' to me and many others who share my views.</p>
Disagree	<p>As a Christian, I absolutely believe that God has made life sacred regardless of one's present condition, to the end of one's life. I very much believe this is a dangerous door to be potentially opening up for vulnerable adults who may at some time see death as a welcome reprieve whereas normally, the medical focus is always on alleviating pain but never with assisted dying as a valid option.</p> <p>I can think of people with mental health conditions who could argue that their condition is truly terminal and therefore may argue that they should be allowed to die. Would it be possible for one doctor to diagnose someone with chronic ongoing permanent depression whilst then also resisting that patient's wishes to end their life because of such a diagnoses?</p> <p>The doctor - patient relationship has always been to do no harm and help people, even if this is in small increments in relation to their condition. If the possibility of assisted dying becomes an option, how can a patient truly trust their own GP to have their own interests at heart if, perhaps, one GP would lean towards permitting assisting dying as a good option.</p> <p>No doctor is infallible, as much as there are legitimate reasons why someone would wish to peruse assisted dying, no-one should have to shoulder the burden of allowing the patient to take this option.</p>	Other	<p>I do not believe the option should exist, as stated.</p> <p>Every other question on this consultation seems gauged to extract some support for this bill in some capacity. I wholeheartedly hope that it does not pass and open up the possibility of death being treated as a good, welcoming option for someone. I have worked as a support worker previously and understand that there will be some very ill patients who may try to portray themselves in such a manner as to get the required sign off from two different doctors as mentioned here.</p>

Disagree	<p>We live in God’s world. “The heavens declare the glory of God,” [Psalm 19:1. “Because that which may be known of God is manifest in them; for God hath shewed it unto them. For the invisible things of him from the creation of the world are clearly seen, being understood by the things that are made, even his eternal power and Godhead; so that they are without excuse:” [Romans 1:19-20]</p> <p>We are made in the image of God [Gen 1:26-27]. This is what gives us significance as individuals. From conception a human life is sacred and special and should be treated with respect.</p> <p>“Assisted Dying” is the deliberate taking of life in contravention of the sixth commandment, “Thou shalt not kill.” [Exodus 20:13]</p> <p>Our lives are not our own, as Job said, “the Lord gave, and the Lord has taken away, blessed be the name of the Lord.” [Job 1:21]</p> <p>The Lord Jesus Christ was asked what the greatest commandment is, “Jesus said unto him, Thou shalt love the Lord thy God with all thy heart, and with all thy soul, and with all thy mind.” [Matthew 22:37]. We do this if we listen to what he has said and obey it.</p> <p>The Lord Jesus Christ went on to say that the second commandment is like unto it, “Thou shalt love thy neighbour as thyself.” [Matthew 22:39.] We are to be compassionate and caring. This is to be especially true of those who are weak and vulnerable. We must do all we can for those who are in pain and to comfort those who have a terminal illness. Legalising “assisted dying” completely alters the balance of this.</p> <p>There are people who hate to be a burden on family, friends and society. Not wanting to be selfish it may be that some see “assisted dying” not so much as an option but as almost a duty. Such a person is unlikely to admit this though.</p>	Not Answered		Medical clinician assisted suicide is wrong.
Disagree	<p>I Believe that we should protect the most vulnerable in our society.</p> <p>In the countries that have legalised assisted dying, the legislation has been extended. I would have grave concerns that would happen on island.</p> <p>In all countries where assisted dying has been legalised, suicide rates have also increased.</p> <p>We should focus on excellent palliative care services not ending lives.</p>	Not Answered		<p>This survey is extremely biased and reads as if assisted dying has already been approved and you are trying to figure out how it should be carried out.</p>

Disagree	<p>Anywhere in the world where assisted dying is legislated inevitably the culture changes and those who are vulnerable such as the disabled or elderly end up either being offered assisted suicide as an option or they increasingly feel 'it's what society or one's family now expect me to do as I'm becoming a burden.' Cases of this are mounting in Canada and other nations globally.</p> <p>The relationship between medical professionals and patients negatively changes.</p> <p>Whilst our government is currently seeking to reduce the amount of suicides through other legislation because suicide never the option, it is frightening that such legislation is also being considered in order to create doctor assisted suicide.</p> <p>Caring is the most compassionate approach in any loving nation. There is no need for any person to die in pain if we as a nation invest in excellent palliative care.</p>	Not Answered	<p>The language used (Assisted Dying) fails to reflect accurately that what its happening is doctor assisted suicide.</p> <p>As per Q 8</p> <p>The relationship between doctors and patients is forever changed,</p> <p>The compassionate culture changes as has been seen in many jurisdictions including Canada. The frightening case widely reported in December 2022 of a veteran and paralympian athlete who was told that a stairlift could not be provided to help her access her home but if things are so bad "had she considered assisted dying" reveals the reality of such legislation.</p> <p>https://www.dailymail.co.uk/news/article-11497589/Paraplegic-Canadian-veteran-says-government-caseworker-offered-euthanasia.html</p> <p>A compassionate caring society will invest in palliative care rather than creating a legal culture where the most vulnerable feel that doctor assisted suicide is the most appropriate course of action.</p>
Disagree	<p>As a Christian, I object to assisted dying on moral grounds absolutely and without compromise. Further I think that legally it will not be possible to ascertain whether a person is agreeing to assisted dying because they feel like they are a burden although they would rather keep living in palliative care, or even worse, that they are bullied or coerced by family members to do so against their will. This is an horrific scenario and there is no means of testing this. Also, doctors do not have exact answers to how long a terminally ill person might live, for instance a few weeks may be given as an estimate but the patient ends up living for months. Legally these and other issues are a slippery slope and not far from ending lives for convenience sake.</p>	Not Answered	<p>This survey is extremely biased and disappointing. The "yes or no" should be addressed first, while this survey is already dealing with the "how". I have not answered many of the questions as doing so would imply my support when I once again want it made perfectly clear that I am 100% against this bill. Dr Allinson is pushing a personal agenda that is not to the benefit of the Manx people.</p>

Disagree	<p>As a Christian, I object on moral grounds, life is too valuable to throw away for the sake of convenience.</p> <p>Just as with abortion, where the reason primarily offered as validation is a child resulting from a rape. The truth is surveys show more than 98% of abortions are mostly for convenience, getting rid of a problem, nothing to do with rape or the life of the mother.</p> <p>The same would be for this, open the door to terminally ill and next it's chronical illness, disabled etc, all under the banner of 'quality of life'. I personally have known people told they have days, weeks even months to live but are still alive years down the line enjoying life with grandkids they otherwise would never have met.</p> <p>A warning from history, similar excuses were used on mainland Europe in the 1930s and 40s by Hitler, referred to as Untermench.</p>	Other	Born and bred Manx	<p>A more biased survey I have yet to come across. You are assuming agreement and creating scenarios that imply agreement, even when none is given. Everyone who is in a depressed state is open to suggestion to 'end it all' for the sake of 'not being a burden'.</p> <p>I have not answered many of the questions because the wording is such that to answer would imply support. Dr Allinson promoted abortion and now promotes euthenasia, he seems to have a personal agenda for whatever reason but it is not to the benefit of the manx people.</p>
Disagree	<p>Assisted dying is a misnomer to make people think they are helping someone to ease their passing. The correct name for this proposal is Assisted Suicide. Suicide is something that very many agencies seek to prevent because society believes and acts on the principle that life is precious at whatever stage. This proposal will undermine all the good that these agencies do in seeking to protect life and helping those who may suffer from depression and other mental conditions .</p> <p>If this proposal became law it would place a burden on those who might have a terminal illness to consider taking this route in order not to become a burden to their family and if established that there is a right to die in law it almost inevitably in many peoples minds become a duty to follow to relieve family of their responsibility to care and not be a burden on hospital services.</p> <p>This would impact those with disability but none of the groups fighting for disability rights consider this an acceptable way forward.</p> <p>Having worked in terminal care, my view is that these services should be better funded and greater provision should be made particularly in an aging population in order to help people die in a dignified way.</p> <p>My other objection to this proposal is on the basis of what has happened in other countries where this has been introduced where the original safeguards ensuring that the intentions were for a specific group of terminally ill people who have a very short time to live have been gradually thrown aside and this facility has been allowed to include a wider spectrum of people who have some ailment . It seems to me that the ultimate intention of those who seek to bring in this law is to make it possible for anyone to do away with themselves for whatever reason.</p> <p>Then there are a number of professionals who would be involved in this</p>	Not Answered		<p>This Bill should not be allowed to become law.</p>

Agree	<p>I believe terminally ill individuals should be able to decide when to end their own lives, subject to appropriate safeguards. I believe this option should be available as a means of preventing undue suffering as a result of a terminal illness or medical condition. I wish the option had at least been available as a choice for my father, who suffered a slow and painful death. I hope it will be available in future for other families so they do not have to go through the same.</p>	Other	<p>I am not sure if they should have to be permanent residents of the Isle of Man</p>	<p>I have no other comments.</p>
Agree	<p>I believe that a person should have the option to choose if he thinks he is already suffering too much and that continuing to live is not actually “living” but suffering.</p> <p>I trust that IOM have the necessary safeguards in place to assess the individual who is making the decision and by granting their request is actually helping them and ending their pain and suffering from being terminally ill.</p>	For over 1 year		<p>Please ensure that the process will be as painless and “comfortable”. The drugs should make the person relaxed and should relieve them from anxiety and hopefully help them die as peacefully possible.</p> <p>Provide post support, stress therapy for the family who lost their loved ones from assisted dying and healthcare personnel should explain to them that the decision of their loved one have been carefully considered based from their current condition.</p> <p>This is to alleviate any guilt that they might feel after consenting with the decision.</p>
Agree	<p>Assisted Dying has been shown to be a safe, compassionate and peaceful death for those who choose it. Decades of data from tens of jurisdictions have confirmed this. Likewise, jurisdictions that have legalised assisted dying have seen palliative and other end-of-life care improve as a catalyst. With this knowledge and the fact that too many people, despite excellent care, still experience a bad death, it is time to legalise a safeguarded and tightly drawn assisted dying framework. Additionally, it is well known that assistance in death happens every day within the NHS. Such assistance in the form of double effect, palliative sedation and the removal/refusal of treatment and food/fluid is often done unto people without their explicit consent. Therefore, a regulated voluntary assisted dying system would put transparency, protection and safety at the centre of end-of-life decision-making and bring clarity to a currently unsafeguarded system. Moreover, it would give those at the end of life greater autonomy and reassurance over their final chapter of life. Many terminally ill people have been stripped of so much by their illness, giving them the choice of an assisted death, should they ever need it, gives comfort and reassurance at a frightening and difficult time. Public opinion on assisted dying is overwhelmingly supportive; politicians are being the curve on this with inaction reinforcing the pain and suffering the terminally ill are forced to experience. Not legalising assisted dying due to concerns about how it might operate is a poor reflection of the legislator and those responsible for regulating such provisions - it can and should be implemented safely and robustly with monitoring and reviewing procedures. Not allowing assisted dying is an endorsement of the status quo, where people are suffering unbearably and denied choice because of 'what if' concerns - concerns that have been disproven by decades of data from permissive jurisdictions. The time to</p>	Other	<p>For 'at least 12 months', in line with the current proposal in Scotland.</p>	<p>Regarding question 17 - there should also be provision for the patient to be referred to a specialist in their illness if there are any doubts about the terminality or progression of the illness. This should not be mandatory from the outset and only used if there are variables that a specialist can assist the first practitioner with.</p> <p>Regarding question 18 - the patient should be informed, but there should be no obligation to accept the treatment. Everybody has a legal right to refuse treatment if that is their competent wish. This is a well-established area of healthcare, and legal precedent supports this.</p> <p>Regarding question 19 - for those unable to write/sign, proxies and other assistance should be accommodated, as is already the case in other healthcare decisions where consent is explicitly sought.</p> <p>Regarding question 20 - a mandatory waiting period is helpful to allow the patient time for reflection and discussion with family and for the healthcare practitioners to make arrangements for the assisted death. However, the waiting period could start after the first request for an assisted death rather than after the evaluation process - either way; the person is still undertaking 14 days of reflection.</p> <p>Regarding question 21 - the period should be shortened; permissive jurisdictions differ on the time limits. This proposal seems to have found the right fit for the IOM.</p> <p>Regarding question 22 - Again, permissive jurisdictions differ on this.</p>

Disagree	<p>I am concerned that bringing in such a law as this then allows for it to get stretched in the future to include other circumstances, as has happened in other jurisdictions. The definition of “terminally ill” given here already includes a multitude of conditions where, although they are progressive and will ultimately shorten life, nevertheless the person can expect to lead a full life up until nearing its end, which may not be for some considerable length of time. Allowing these people to consider assisted dying from the point of diagnosis devalues their life from that time on as not being worthwhile.</p> <p>In addition, contrary to the information portrayed in the preamble, funding for palliative care services is almost always negatively impacted in areas where assisted dying is allowed for. This leads to inadequate and under resourced palliation for those who seek it.</p> <p>I also have concerns that despite the reassurance of whatever checks are put in place, some people will inevitably seek this option simply because they feel their life to “be a burden” - either to those they love, or to the health and social care system more generally. They may even be encouraged to feel this way by those self same people.</p> <p>Lastly, as someone who has lost a friend in the past year who decided to take their own life, I believe that legalising assisted dying sends the message that suicide itself is also something that as a society we should accept as “normal”. This should never be so. Instead, we should be promoting all measures to help people with mental health issues to seek help and recovery, and to show them that there is a better way than ending their life.</p>	Not Answered	<p>I have strong concerns about the dangerous possibility of lethal quantities of drugs either being held in a person’s home or effectively allowed to circulate freely in the community.</p> <p>I am also concerned by the possible impact on healthcare workers who oppose this option as a matter of conscience but who may be forced to advocate it to their patients if it becomes law.</p> <p>What are the financial implications of offering assisted dying and how will this be funded? Is this fair when other life-saving treatments are poorly funded?</p> <p>I am shocked by how biased this consultation is in how it poses its questions and so have had to leave several questions unanswered so as not to indicate support for the proposal. I am strongly opposed to the introduction of assisted dying but feel that my ability to express this is constrained by the way this consultation has been conducted.</p>
Disagree	<p>A change in the current situation will open the door to future legal changes, allowing assisted dying in a larger range of situations. For example, mental health, non-life-threatening disabilities. No degree of safeguarding against this at this point can prevent this future potential catastrophe. This is evident from the legal standing of assisted dying in Canada.</p> <p>There is a huge potential to utilise assisted dying to relieve financial pressures and burdens of overstretched healthcare providers and social care.</p> <p>Having lost my first wife to cancer, I have seen the pain, and discomfort patients can endure whilst on a palliative care pathway. However, we have an excellent healthcare system, with incredibly good palliative care services, which in my opinion offer patients an excellent pathway, rendering the proposal for assisted dying totally unnecessary.</p>	Other	<p>questions12, 13 and 14 are biased in favour of assisted dying. I strongly object to assisted dying and the manipulative way these questions have been worded.</p> <p>The questions in this consultation are very biased in favour of assisted dying, and this is likely to skew the data in favour of assisted dying, and those promoting this private members bill.</p> <p>I am a community pharmacist and find it shocking that it is even being considered that community pharmacy could find itself supplying medication to end a persons life. No mention has been made of which drug cocktail is being proposed, or the traumatic side effects that will result for those unfortunate enough to receive them. No consideration seems to have been used into the unforeseen issues this could cause, such as dispensing errors, handover errors, or theft of medication from the patient's home. Both of these potential scenarios could lead to an avoidable death of an innocent person.</p> <p>I have intentionally declined to answer multiple questions as they are mis-leading or assuming I am in favour of assisted dying.</p>

Disagree	<p>A matter of conscience. I just do not believe it is right.</p> <p>We are rightly concerned about preventing suicide, and yet here propose to provide for the early termination of life - it just seems to me to send a mixed message.</p> <p>The Convention on Human Rights provides for the right to life, and this seems to me to send a confusing message in a world where life can be extinguished far too easily.</p> <p>How about “assisted living”? Will the material/drugs used to administer the assisted death be funded on the NHS and therefore reduce funds available for the care of those who wish to live?</p> <p>I also fear there will be “mission creep” with calls to extend the provision for assisted dying notwithstanding current proposals and safeguards.</p>	Not Answered	Only to reiterate my in principle opposition to the proposal for the reasons given in question 8.
Agree	<p>I have spent my working life in the nursing profession and have witnessed ,in my opinion,the unnecessary suffering of patients,and anguish of their relatives.</p> <p>.I am now at the age that I would like to make the choice if the occasion arises and I become terminally ill.</p>	For over 5 years	
Disagree	<p>I have enormous sympathy with those who have a terminal diagnosis, but I strongly disagree with this proposal, and also with the way this “consultation” has been put together. I’ll comment on issues with the consultation in answer to question 28.</p> <p>I am very exercised about this proposal and have done a lot of research into it. Here are the core reasons why I am against the proposal, though there are many other concerning issues. (I’m sorry that my response to this question is rather long – I was not able to engage with many of the other questions.)</p> <p>1.The Slippery Slope.</p> <p>The preamble says “..there have been consistent calls and campaigns for individuals to be allowed greater autonomy and choice when they approach the time of their inevitable passing.”</p> <p>I think, (but it’s not actually stated anywhere, which itself is an issue) that it’s currently envisaged that on the Isle of Man AD is proposed to be available (only) to those with a diagnosis of a terminal illness, with a prognosis of 6 months or less. Putting aside for now the well documented difficulties in accurately determining a 6 month prognosis, whenever I’ve heard a member of the public speaking in favour of AD recently it’s usually because they say they want the choice of when and how they will die, and even the preamble to this consultation gives the impression that those calling and campaigning will be satisfied if this proposed Bill is successful. BUT, the current proposals won’t allow that choice except for a very few (ie unless and until they were told they had only 6 months left to live, and once in that position decided that they wanted to shorten the number of days they had left), so it’s already obvious that there will be further “calls and campaigns” to widen the scope further. Why not the chronically ill?</p>	Not Answered	<p>Again, I'm sorry this is long, I couldn't answer many other questions without suggesting that I supported the principle of Assisted Dying, which I don't.</p> <p>Comments on this consultation process:</p> <p>I’m not at all happy with the way the consultation exercise is presented.</p> <p>In May 2022 Dr Allinson (interviewed by Manx Radio) said people want a “meaningful” consultation and engagement with the public around some of the core principles involved. If that’s correct, this consultation falls far short of being meaningful. The consultation and its lengthy preamble is very clearly biased towards the perspective of those who support assisted dying, those who don’t, (like myself) are obliged to write long essays under the answers to the only two questions out of 28 where we are able to actually express our views. This is very poor practice, I don’t know how the people charged with interpreting the results of this consultation will do so and present its results fairly when the only dissenting answers are discussive and potentially wide in scope (like mine), rather than answers to specific questions posed in such a way that all views, including those dissenting as well as affirming the proposal for a bill permitting Assisted Dying, can be considered.</p> <p>*Bias and unsubstantiated claims in the introduction to the consultation*</p> <p>Even before opening the consultation, the very long preamble is</p>

Agree	People’s level of pain can’t always be maintained in a way that allows them to be more than comfortable this has a massive impact on not only the the person who is terminal but there family to, it makes the passing of a loved one so much harder to deal with both mentally and emotionally	For over 5 years	Can’t say I’m fully sure about question 27 me personally I’d have got my family together and the medical team together to have heard my point of you only if I had a debilitating illness or was terminal don’t think I would put it in a Living will to be honest. But that’s just me.
Disagree	I am concerned this would be the thin end of the wedge. I think it is unethical. I think that the right to die would become a duty to die when it came to the time rather than a right. I think it would be better to extend the palliative care available at hospice.	For over 5 years	I did not answer questions 9, 12, 14, 15, 19, 20, 21, 23, 24, 25 and 26 as I do not wish to endorse legalisation of assisted suicide. Also The wording of these questions skew this questionnaire in favour of confirmation bias. Q26: any plans must include details of review procedures and intended contents of annual reports and be open to scrutiny before any further legislative steps are taken. Q17 I think all people requesting assisted Death should undergo a capacity assessment by a psychiatrist Q10 suggests a very broad application of the term “unbearable suffering “. This is subjective and open to interpretation. Q22 It would be extremely dangerous to have lethal drugs circulating in the community.
Disagree	In principal, I believe this bill bring about significant danger to our society. Advancement to medical science is so wonderful as it allows us to be in such a fortunate not only to fight against most illnesses, but to put in place caring and peaceful palliative care for those who suffer from incurable illness. Although my heart goes out to those who suffer as a cause of such heart breaking circumstances, I strongly believe that this bill brings about more than what is being discussed in the public domain. What this bill represents is a drastic change in the morality of us as a society, where we put value and what is deemed sacred. From my readings around this topic I have dismayed to see the effects this legislation has had on countries who have adopted it with it clearly acting as a turn in the road for morality. I fear that this bill will simply be the first opening door to bring in a tourism of death rather than positioning this beautiful Island as a place that hold life as dear and a nation that chooses to care and comfort those who suffer above all.	Other	I believe this bill should not be allowed for any residents. I am dismayed at the low level of integrity show by who ever has putt his process/survey together. The huge majority of questions have taken the out right presumption that I am for assisted dying in any capacity and don't give me the right to express my concern for the moral principle of the whole thing. This surely can not be so when the government is taking opinion from the general public on a topic that will hail a seismic change in the morality of the nation. This process is deeply bias and will cause people to make unknowingly comment on the detail of an issues they are against outright.

Disagree	<p>I am totally opposed to the introduction of 'Assisted Dying'</p> <p>I have both lost my Father, an aunt and an uncle over recent years to what are considered to be cruel & debilitating illnesses (cancer, motor neurone disease and dementia) Having to watch these three individuals that I loved dearly each suffer in their final days, was heart breaking but I do not believe that if someone is terminally ill, enabling them to take their own life, or assisting someone to take their own life, should be allowed in law. The palliative care received by each person I have known who has suffered a terminal illness has been excellent and compassionate allowing the patient to be comfortable in their final days.</p> <p>This proposed change in the law, if passed, sends a message that suicide is “acceptable” and would remove the belief in the sanctity of life and contradict all the reports & findings being issued in more recent times about the need to fully support those with mental health issues.</p> <p>However many safeguards are considered & included within the proposed legislation, it is unthinkable that we should then expect members of the medical profession to hasten death.</p> <p>The doctor patient relationship is one of trust. Doctors and medical professionals are expected to preserve life and provide the best palliative care in a persons last days, rather than suggesting to a patient, or after pressure from their family, that the person should be ‘put out of their misery’. Medics should solely be required to continue to provide care which manages a persons final days with skill and compassion, allowing them to be comfortable, with the pain being managed well.</p> <p>The phrase “assisted dying” has the same outcome as “assisted suicide” or "voluntary euthanasia and describing them as different approaches is dangerous and misleading.</p>	Other	<p>The Isle of Man should not be a place for suicide tourism and suicide migration at all</p>	<p>It is disappointing that the consultation questions are loaded towards and assume the respondent is in agreement with the principle of assisted dying. My comments below refer to the questions raised which I have been unable to answer as it appears that to do so assumes I am in agreement with the proposals.</p> <p>The consultation indicates that assisted dying should only be offered where limit is placed in a persons life expectancy. Predictions of life expectancy are not a 'exact science' and therefore not reliable.</p> <p>I do not support assisted dying in response to any diagnosis. Reference to 'unbearable suffering' in question 10 is too wide and has the potential to cover illnesses that are not terminal. This supports my comments earlier that the introduction of any form of assisted dying has the potential to be interpreted more widely than intended.</p> <p>If a patient is unable to take oral medication it should not be expected of a medical professional that they step in to administer the drug which places greater demand on doctors. Doctors should be able to conscientiously object.</p> <p>It is inappropriate to ask should children under the age of 18 be able to make such a decision. (Q.12) surely this would never be a decision that a child can make?</p> <p>The Isle of Man is a beautiful island and should attract visitors on these merits and not be a place for 'suicide tourism'.</p> <p>Everyone making a decision to end their own life should be assessed without exception as to whether they have capacity to request assisted death. That person should also be made fully aware of the provisions for palliative care and not made to feel that they are a burden. I believe it would be very difficult to monitor whether these</p> <p>I do not support mercy killing today and in the future.</p>
Disagree		Other		
Agree	<p>Whatever the arguments against it, they pail into insignificance for anyone who has ever seen a loved one suffer extreme pain with a terminal condition. In 2023 it is a disgrace that the option to end one's life is not a legal option in any civilized country.</p>	Not Answered		

Disagree	<p>The IOM is clearly being used as a way to pressurise Westminster on this subject but the arguments remain the same.</p> <p>First, that in an effort to relieve the suffering of some, there creates more suffering for others- and often those most vulnerable in considering themselves a burden as experience from Canada has shown. This is why there is consistent and persistent opposition from many organisations representing those with significant disabilities or who need significant care.</p> <p>The breaking of the age old principle that doctors should not be involved in ending life is a safeguard with great wisdom. Once broken, it has proved impossible to contain as in every other place where it has been implemented there has been an extension to include groups other than those who have a terminal illness, even children- Canada, The Netherlands, Belgium etc</p> <p>There is also a growing disquiet among medical professionals at the change of culture such a break brings about as in 'normalising' assisted suicide, the rate of suicide itself increases in the wider population. These are un-foreseen consequences which have to be taken seriously. Just because you don't see the person in front of you suffering, doesn't mean that person doesn't exist- they still need protecting and a change in the law will harm so many more unseen people.</p> <p>Secondly, people who are dying and chronically unwell deserve the best care and in my experience as a GP, most patients are afraid of the process of dying because it is not always something that is handled well by medical professionals, and access to good care is not universal. This is where we need to focus attention as best practice in palliative care removes the necessity for assisted suicide. This is why the vast majority of palliative care physicians and those closest to delivering care to those who are dying are</p>	For over 5 years	I do not think it wise to encourage medical tourism	<p>First, it would be very unwise to have lethal drugs in circulation in the community without safeguard. Given the unpredictability of human behaviour this would be unthinkable.</p> <p>I did not answer Qu 26 in case it should be thought to support assisted suicide.</p> <p>Details of review procedures or the intended contents of annual reports should not be left to later regulations: they must be defined and made open to scrutiny before any further legislative steps are taken.</p> <p>I would also add a comment to Qu 27 as I am extremely concerned regarding the Dutch experience where a woman with dementia (a terminal illness) refused three times to have a lethal injection administered despite an earlier advance directive and was held down by a relative in order to facilitate the doctor doing this. Dutch law upheld the doctors action, supporting the view that a change of mind was not allowable in the face of such a prior arrangement. We may think we are immune from such outcomes of a change in law but we are not- it is the fundamental act of breaking this principle that will lead to such consequences.</p>
Agree	<p>Having recently seen first hand what it's like when someone with a terminal illness is at the end of their life, the last thing for them should be control over what happens since every other element of control has been taken away from them.</p>	For over 5 years		<p>It's such a difficult subject, with so many considerations on both sides.</p> <p>I understand concerns about people potentially feeling they've been forced into making a decision. How do you independently ensure that's not happening? I feel the medication should be given by a health professional, the idea of it being in someone's home is terrifying. If only the ill person has been medically assessed you have no way of knowing if someone else would consider taking it!</p> <p>But as people are encouraged to have good births - why shouldn't they be allowed a good death? As dignified and as pain free as possible.</p>
Disagree		Not Answered		
Disagree	<p>I do not agree with this as it is total madness when we can do so much more to the island by focusing on the economy.</p>	Not Answered		<p>Not a priority</p> <p>questions are loaded in one direction</p>
Disagree	<p>judging by other places i dont think it is safe here in the uk or on the island</p>	Not Answered		<p>sure enough the mhk can find other things to satisfy his agenda</p> <p>there are so many issues affecting people he can help with if he puts his mind to it</p>

Disagree	I really feel that this is an agenda of selected few. It does not concern vast majority of people. Death is peaceful to most of us. Hospice and palliative care is there to help unfortunate people. Please fund hospice and palliative care and make a name that way. Focus on hiring frontline staff for hospitals- nurses healthcare assistants etc.	Not Answered	After I answered NO to the key question, every following question was misleading and assumes I am in favour of the proposal. How fair is it? Has anyone thought about this at the top? Please do not ram your personal agenda in the name of freedom. If you really care about freedom for people, there are so many things you can do. Start with payrise to public sector workers, sort out homelessness on the island. These things need hard work and dedication and forward planning. Not fancy and whipping emotions like this one.
Disagree	Not for me.	Not Answered	poorly designed amateur questions.
Disagree	We all die one day. Why care about how we die? Just help us when we need to manage illness and suffering whilst keeping us alive. Sure it is possible with so much progress in medical care. Oh I forgot, that will cost money! So, it is easy to bump us out. Slowly you will choose which are the group of people you can bump off and save money! This seems worse than some infamous leader's plan in 1940s.	Not Answered	Stop this madness and focus on tasks concerning real people in real time. Not some futuristic hypothetical madness.
Disagree		Not Answered	
Disagree		Not Answered	
Disagree	waste of time and money the proposal is based on fear of unknown	Not Answered	hypothetical questions are not the right way to make law
Disagree	I talked with my friends and family. I listened to radio. I read online, listen online. I conclude that the proposal is wrong. I do not agree.	Not Answered	Does anybody in the government think this is a fair survey?
Disagree	People can change their minds	Not Answered	I don't believe in any form of assisted dying
Disagree		For over 1 year	
Agree	Strongly believe individuals should have the choice of assisted dying for terminally ill adults. Also strongly believe the religious minority on the Isle of Man, who are anti-assisted dying, should not have disproportionate influence on the outcome.	Not Answered	If non-residents request Assisted Dying, safeguards must be in place to ensure the process prevents the Manx Government (tax payers) shouldering the financial burden for their decision to die here.
Agree	Strongly believe individuals should have the choice of assisted dying for terminally ill adults. Also strongly believe the religious minority on the Isle of Man, who are anti-assisted dying, should not have disproportionate influence on the outcome.	Not Answered	If non-residents request Assisted Dying, safeguards must be in place to ensure the process prevents the Manx Government (tax payers) shouldering the financial burden for their decision to die here
Disagree	We do not have the right to terminate life in any circumstances.	Not Answered	

Disagree	<p>By ‘assisted dying’ is generally meant either physician-assisted suicide or euthanasia or both, see our briefing paper on definitions https://www.bioethics.org.uk/research/euthanasia-assisted-suicide-papers/defining-the-terms-of-the-debate-euthanasia-and-euphemism-professor-david-albert-jones/</p> <p>The Parliamentary Office of Science and Technology, in Westminster, has completed a briefing paper which may be of use to the Tynwald. It defines ‘assisted dying’ as an umbrella term covering both physician-assisted suicide and euthanasia. https://researchbriefings.files.parliament.uk/documents/POST-PB-0047/POST-PB-0047.pdf</p> <p>Physician-assisted suicide and euthanasia involve intentional ending of life by, or with the assistance of, a doctor. This is fundamentally different from ordinary medical care and from palliative care. It represents a radical departure from the traditional ethic of medicine which allows the taking of risks and acceptance of side effects, and allows treatment to be withdrawn when it is no longer effective or is doing more harm than good, but never allows doctors to aim to kill their patients. Killing is controversial even in warfare and in policing, and while it may be permitted against enemy combatants or violent criminals it is never permitted against the innocent. The World Medical Association, which represents 116 medical associations world-wide including the British Medical Association, has strongly urged that:</p>	Not Answered	<p>While the Centre is based in Oxford, and the director is resident in England the Centre covers the British Isles, including England, Wales, Scotland, Northern Ireland, the Republic of Ireland and the Isle of Man.</p> <p>Many of the ‘Yes/ No’ questions in this consultation have been skipped. This is not because the questions have not been considered but because those questions seem to presuppose that there would be a law, whereas this submission argues that such a law should not be enacted as it would be harmful.</p> <p>It should not be assumed, however, that the skipping of these questions implies approval for the most dangerous options, for example, for physician-assisted suicide and/or euthanasia for minors (question 12) or for those who might lack of capacity (question 17) or approval for the Isle of Man becoming a centre for suicide tourism (question 13).</p> <p>If, despite these dangers, legislation moves forward in the House of Keys then Members should seek to limit the danger by restrictions such as age, residence and the nature of the person’s condition. However, the idea that these restrictions constitute ‘safeguards’ is naïve. It first of all ignores the fact that in all jurisdictions with such laws the practice expands beyond the law and doctors are rarely if ever prosecuted. It also ignores the reality that in most if not all jurisdictions with such laws, the laws have already been extended, either by court cases or by tabling amendments. For example in</p>
Disagree	<p>“No physician should be forced to participate in euthanasia or assisted Assisted Dying should not be allowed to be permitted on the Isle of Man.. It would change forever the relationship between the Medical Profession in general and a Doctor in particular, with their patients. Pressure would be put on patients when they are at their most vulnerable. My late wife, Shirley, had Kidney problems, was born with one kidney that did not properly develop which was removed at the age of 4years. I do not believe the increadable treatment Shirley received would happen. In the countries that Assisted Dying legislation has been introduced it has led to proceedures being carried out that had never been envisaged. Dr Allianson makes great play on the Safeguards that the Isle of Man would have in place to prevent abuse. One should remind ourselves of Mr Tim Glover, whilst at Manx Radio, asked what could be termed a rhetorical question, on interviewing Dr Allianson after Dr Allianson's disastous Media Consultation Report to Tynwald Are you naive?</p> <p>Please note that I am not answering the rest of the questions as they do not apply.</p>	Not Answered	

Disagree	<ul style="list-style-type: none">•The campaign for ASE is based on fear, not reality. Most deaths – even according to Dignity in Dying – are peaceful. But the availability of euthanasia does not address the problem of pain and restlessness; in the Netherlands, where ASE has been legal for more than 20 years, between 20.9 and 40.8% of deaths still experience pain and restlessness. There are a very few cases where taking action to end a life is necessary and right. But they are unlikely to be prosecuted, let alone be convicted. Leave the law as it is.•Society must protect its members, sometimes from themselves. That is why we have suicide prevention. The logic of ASE is to have no suicide prevention – or to prevent some from suicide while encouraging and assisting others to kill themselves.•Human lives should be treated as of equal worth. Our homicide laws provide the same penalty for killing an ill 87yr old as it would for killing a healthy 27yr old. Why would our attitude to suicide be different?•It is barbaric to actively kill citizens, whether as punishment for a crime or simply because their lives are wretched. The problem is not the fate of the individual concerned but of the fate of a society that agrees to kill them.•The impetus behind ASE may be compassion – but is also utility. The commitment to autonomy claimed by proponents of assisted dying is false; no one campaigns for everyone to have the right to die. Instead, proponents want to reserve the “benefits” of ASE to the ill, the disabled and the elderly.	Not Answered	<p>We urge the people of the Isle of Man to reject assisted dying altogether.</p> <p>There is no doubt that there are some cases where a quick death is preferable to continued life. But they are few and the law that protects us all - sometimes against our own actions - is a hugely important principle. The proposal for assisted dying amends this principle by saying that we will strenuously try to prevent the suicides of these categories of people, whilst these other categories will be "empowered" to kill themselves.</p>
Disagree	As I disagree with the Bill,it is pointless me answering any further questions.	Not Answered	
Disagree	A mixture of ethical and practical reasons. No safeguards can adequately protect those who feel that they are a burden from being wrongly encouraged to end their life prematurely.	Other	<p>The above questions are based on the assumption that the consulted does not disagree in principle</p> <p>Many of these questions about safeguards cannot be properly answered by a consulted who opposes the Bill in principle and also are too complex for quick response. Medical and nursing professionals should not be involved in taking life on principle but also in practical terms as it affects them personally and it affects their professional relationship with patients</p>

Disagree	<p>I've always been disabled and am old. I fear an assisted suicide law. Rather than death, provide disabled, ill and older people with legal right to fully supported life, including 24hrs/52weeks year if required. Plus, if there was neglect government would face automatic legal consequences.</p> <p>Neglect, pressure of being a burden, lack of well researched palliative care available to everyone are what make people want assisted suicide. I fear AS law is far cheaper option than support to live. Even if law was restricted, we see from every country that has enacted it an expansion to include more groups. Disabled people, who are far from considered equal in society, are at great threat from such laws.</p> <p>Most disabled, ill and older people can commit suicide themselves. i know, I've contemplated it. With law I'd have died when my mother couldn't care for me and we lived in abysmal neglect for years, or when she was neglected in nursing home, as so many are, but I took food in and she lived longer.</p> <p>I've known many old people none wanted to die though many were afraid of neglect in care-homes, hospitals. I've known many with dementia none wanted to die but some were terrified they'd be killed. I've had cancer. Many people with cancer who wanted to die at some point were afraid later they'd be killed. Hospital should give security that we'll be supported, cared for not afraid we'll die from neglect or pressure to die. We need to trust doctors not to fear they'll kill us. This fear of medical professionals can have such a detrimental affect as a person ages.</p>	Not Answered	<p>The thoroughness and specificity of many of the questions, which preclude any response from those who disagree with giving the state a right to kill people, appears to show that such a law is already accepted. Are we really being asked for our views and will they be considered equally or are plans to enact such a law decided on?</p>
Disagree	<p>1. I don't know of any way in deciding if people will feel under pressure to end their life or how it may be entirely voluntary.</p> <p>2. Evidence from overseas suggests that there is pressure like being a burden of the family, or finances.</p> <p>3. How much objective testing has been done with the mixture of drugs used? Stories exist of long painful deaths.</p> <p>4. If people are old, depressed, have mental issues, can they make a clear decision?</p> <p>5.Who makes the final decision with vulnerable people? Would you want to be the person? Why should it be the doctor-what a load on their shoulders.</p> <p>6.Ther are alternatives such a hospices, palliative care.</p> <p>7. How easy is it to manipulate people to decide? History of the twentieth century says too easy.</p>	Not Answered	<p>Being opposed to Assisted Dying means I cannot comment on many of the questions.</p> <p>My wife who was born at Douglas has always had a high opinion of government in the Isle Of Man. It makes me wonder whether the administration has been taken over by woke supporters</p>
Disagree		Not Answered	

Disagree	Because its wrong, things can change, nobody knows what can happen, people do recover and amaze the medical community. It's wrong to ask doctors and nurses to kill people when they signed up to help them. Life is precious and many people are fighting to stay alive so they can experience the birthdays, weddings and family events that matter so much to those around them, this bill would undermine that fight and discourage them.	Not Answered	Improved pallitive care.
Disagree	If the Canadian experience is anything to go by, legalising assisted dying would be the thin edge of a very large wedge. Assisted dying was legalised there in 2016. Only four years later access to assisted dying was expanded. There are stories now of ordinary Canadians choosing to die at the hands of a doctor rather than live in poverty. Some with disabilities have been encouraged by officials to kill themselves. At the end of last year the Canadian government passed plans to expand access to assisted dying to the mentally ill and "mature minors". In the Netherlands where euthanasia is legal children can be euthanised if they meet certain criteria.. I am vehemently opposed to legalising assisted dying in any circumstances.	Not Answered	and Government funding for Hospice care is the way forward to helping and looking after the terminally ill in our community
Disagree	I strongly object to this proposal. As a committed Christian I believe that people are individually precious and we are to act always for their well being. It is not our prerogative to play at God. This Act would place medics in an unbearable position - they who are trained to give care and maintain life - who will deliberately turn off the life support to a struggling premature baby? Dr. Shipman here we come!	Not Answered	This "consultation" is a disgrace. It is biased in concept and all the questions are based on the premise that this proposal is "a good thing" and all we have to do is work on the safeguards. It is impossible for anyone who objects to the proposal to answer most questions without compromising their position, or appearing callous and in favour of prolonged suffering - which is not the case.
Disagree	When assisted suicide is permitted in a country, the suicide rate in general rises. I have had two friends, neither old nor ill, who committed suicide. It leaves everyone concerned feeling sad and guilty . Giving a few people a feeling of control over their lives is not enough reason for increasing such a sad end to life.	Not Answered	Other places have shown that any safeguards are quickly eroded. The only safe law is a clear line which says no one, especially a doctor, should deliberately collude in suicide or euthanasia. Genuine assistance in dying is not suicide but good all-round palliative care .
Agree	I feel in certain circumstances it is cruel to allow someone to suffer either in silence or in great pain	For over 5 years	
Agree	I believe it is every person's right to decide when they wish to end their life, whilst expecting also that protective conditions are applied, e.g. that they are/were at the time in a fit mental state to decide.	For over 1 year	I believe that the provision of assisted dying is a humane act, and hope this will be enacted as swiftly as possible.
Agree	It's a personal choice that I feel everyone should have the right to make if need be.	Not Answered	To reiterate, it's about the availability of choice. Everyone should have the right to have a say over their own life.

Agree	<p>I saw my parents die in their 90s after many years of disability. Both said they wished they could have gone earlier. At the very end of my father's life I had to give doctors my permission to halt his medication. Not an easy thing to do, but I knew he'd had enough.</p> <p>I know that I will become disabled like they were if I do not have the choice to die instead. In my opinion each of us should have the right to make this decision, and travelling to Switzerland to end one's life when one is disabled is not an appealing prospect.</p>	For over 1 year	<p>I agree that care needs to be taken in this procedure, but that we need to face up to reality: sick people are being made to endure their problems to an unacceptable extent.</p>
Disagree	<p>In all other jurisdictions where assisted dying has been legalised, it has led to a significant widening of the inclusion criteria well beyond the initial definition proposed. It normalises suicide in society which is dangerous. It removes safeguards for the most vulnerable in society and in many countries has led to decreased funding and support for palliate medicine. Many of the following questions in this survey presume agreement with assisted dying - a response of 'not sure' is not strong enough, hence I have not answered many at all.</p>	Not Answered	<p>With the quality of palliative care available, this feels wholly unnecessary. We would be doing our children and future generations a great disservice by introducing this. It is clear from other jurisdictions that the law change is uncontrollable; most start with 'terminally ill' which, as a doctor I know isn't always a clear diagnosis, then extend to chronic illness, disability, mentally ill, even to children in some countries. It would likely damage the trust placed in the patient:doctor relationship and is far removed from the principle of 'first do no harm.' Even in the context of terminal illness, I speak from both a medical view and a person view that the natural dying process is often a time of great healing and compassion from which families can draw strength - we should be investing in palliative care options rather than offering an expedited clinical execution that opens the doors to abuse and lasting feelings of guilt.</p>
Disagree	<p>I do not agree with this proposal as it is not needed for the island and its people.</p>	Not Answered	<p>all questions after I said no, are unnecessary and misleading.</p>

Disagree	<p>I would like to state in the strongest terms that I am completely opposed to this “Assisted Dying” bill which would more accurately be termed physician assisted suicide.</p> <p>I would sincerely hope that you have received and read the “assisted dying” leaflet put through I think all doors on the Island from the Manx Duty of Care group which clearly describes why it would be a disaster for the vulnerable on the Island if this bill goes ahead. This bill is marketed as applying to those in severe pain. However it is seen in other countries how this initial purpose becomes expanded to include those who “don’t want to be a burden” or simply those going through a period of depression. It is open to much abuse by putting pressure on those who are vulnerable (ill, depressed, elderly, handicapped, people with learning difficulties) to end their lives so as “not to be a burden” and even more serious abuse where people who are not able to make their own choice through illness, coma, learning difficulties are in the hands of maybe unscrupulous family members who sign their death warrant on their behalf. We have amongst the best palliative care in the world which does a great job as people approach the end of their lives. Interestingly at least some countries who support physician assisted suicide have very poor palliative care. Also, in Canada which recently supported this kind of bill, there have been instances where Palliative care institutions who do not support this kind of suicide are refused funding. We should put our time and efforts into world-class end of life care not into supporting this kind of suicide which diminishes human dignity and the value of life.</p> <p>Please see the shocking https://www.assisteddyinginnumbers.org/</p>	Not Answered		<p>I oppose it completely so do not accept that there will or should be any "process" to this physician assisted suicide</p>
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Disagree	<p>There is a real danger proposal will leave vulnerable people widely exposed to direct or indirect pressure to bow to pressure to end their lives. There is well documented evidence which reports elder abuse is experienced in around 1 in 5 households in the UK. WHO reports 1 in 6 but suggests that only 1 in 24 cases are reported due to fear. See the paper from the House of Lords https://lordslibrary.parliament.uk/domestic-abuse-of-older-people/</p> <p>There is also a real danger, as evidenced by countries such as Canada who have legalised assisted suicide, that palliative care is diminished and funding withdrawn.</p> <p>This isn't on the UK agenda - which shouldn't necessarily impact IOM - but it could mean the start of a form of tourism for death. What impact would that have on medical facilities and resources that are already stretched here? The cost of infrastructure for assisted suicide would be better spent in maintaining and improving our existing medical and palliative care.</p> <p>It would appear that there is not a lot of support from the medical profession on island. Only 5% of palliative care doctors support the proposal and only 23% of those doctors involved in geriatric medicine support the proposal. If the medics don't want it, why is it being pushed so hard??</p> <p>Who would carry this out? Are we looking at a scenario where businesses see this as a lucrative proposition? Companies with no experience have moved into residential homes and care homes and only yesterday, (January</p>	Not Answered	I am in complete opposition to Assisted Dying and therefore do not believe that any process should be adopted.
Disagree	I am not concerned about my death. I am concerned about murder and killing becoming allowed in law.	Not Answered	Just stop this.
Disagree	I am against all forms of assisted dying. Death should be natural and I expect to be supported till I die. Please do not make a law to kill me whatever the circumstances are.	Not Answered	None. Do not make law allowing some people to be killed legally.
Agree	The prolonged and unnecessary suffering of any individual is barbaric	Not Answered	Why should we keep a loved one alive while they suffer so much if it's not what they want, just because it's easier for us to have them here, rather than to lose them sooner and let them be at peace?
Disagree	My Faith and I think Hospice End of life care is enough.	Not Answered	
Disagree	It goes against the teachings of my Catholic faith.	Not Answered	
Disagree	It goes against the teachings of my Catholic faith.	Not Answered	
Disagree		Not Answered	You got to stop this.
Disagree		Not Answered	Questions after 8 seem one sided and presumptive.
Disagree	In principle, and in real terms, I totally disagree with this proposal.	Not Answered	
Disagree	I am not completing the balance of the survey as it appears to assume that respondents are in agreement for the proposal to progress.	Not Answered	
Disagree	<p>This is bad.</p> <p>Scotland doing it bad</p> <p>Jersey doing it bad</p> <p>We must not follow them.</p> <p>Stop this right now.</p>	Not Answered	<p>Have you set the questions with one purpose only?</p> <p>To influence the results in favour of drafting a law to kill people?</p> <p>Stop this right now.</p>

Disagree	There are currently insufficient health compliance within our current system let alone allowing this piece of legislation to go through. Perhaps in the future but with the latest CQC report on Nobles due to be released at the end of October 2022 and now delayed for unknown reason until the end of March 2023, I do not think we should be looking at this. I have witnessed how Nobles deal with terminally ill patients, effectively withdraw treatment, water and food etc and put in a side room without regular staff visits. I have been told by a doctor that the Liverpool Pathway effectively still exists although not admitted in public which causes me concern. Nobles is nowhere near the standards required for this to be successfully implemented. We are talking about a hospital were A & E senior staff were described as "feral" by the CQC. This A & E report has disappeared from the CQC part of the IOM Government website ? Why ? Other reports are there. Until DHSC and Manx Care can evidence that they are qualified and suitable to manage this then it should be put on the back burner. I would rather more energy be spent on ensuring that cancer treatment deadlines were met rather than report after report detailing the target has failed. Some of the questions below do not allow you to comment, this does not allow the public to explain their response. I have therefore put not sure as this is a wide subject and the questions below do not allow detail.	Not Answered	See my initial comments. Somewhat leading questions in some area's without the ability to comment.
Disagree	No safeguards stopped more people being killed in other countries. Do you really believe that island will be different? This will be the beginning of allowing murder to take place by health staff. Bad really.	Not Answered	
Disagree	Get rid	Not Answered	Get rid

Agree	Assisted dying, with robustly crafted safeguards, should be enabled as a compassionate choice for those who are terminally ill. In many jurisdictions worldwide, assisted dying has enabled those who are suffering, and their families, to choose the time and place of death.	For over 1 year	<p>Q 9 It is notoriously difficult to put an exact time on the remainder of a person’s life.</p> <p>Q 10 My personal experience of this is that my beloved husband took his life at the third attempt, because of life-changing disabilities following neurosurgery. In my view, it was inhumane that he did not have a choice.</p> <p>Q 11 This is the case in some jurisdictions, but there are resource implications of the HCP having to be present from administration of the medication to the certification of death. This will be an important decision for the IOM legislature.</p> <p>Q 17 If there is any doubt about the patient's prognosis, the attending clinicians should be able to refer the patient to a specialist in their condition.</p> <p>Q 18 The patient should be fully informed about all available treatments, but must be free to accept or decline them.</p> <p>Q 20 A mandatory waiting period should begin when the patient first requests an assisted death to allow time for consideration, discussion and planning with family and healthcare practitioners to make arrangements for the assisted death.</p> <p>Q 21 Opinions vary in other jurisdictions as to the ideal time for this. It should be able to be shortened if death is imminent.</p>
Disagree	There is absolutely no need for this law on the island. Less than 10 cases a year may be in a situation like this. Do we need a law for 10? Or should you focus on helping 75,000 people on the island by delivering on economy and education?	Not Answered	No. Just stop this fringe idea!
Disagree	I really spent a lot of time looking around trying to see what would happen if this became a law. I am properly scared. I could be potentially be killed and people may get away from murder!	Not Answered	From question 9, it is all about how to draft the law. I have not answered as I don’t want to go down drafting the law. Law is safe and clear as is. Thank you very much.
Disagree	It can leave vulnerable adults exposed to pressures to comply and can give the wrong impression that there is no alternative. It can give the wrong information that people can die in uncontrollable pain and may be offered to people who have not had the time to fully understand implications of decision	Not Answered	
Disagree		Not Answered	
Agree	Because as I get okder I am aware of the illnesses that can cause a long and painful death. I have always made my wishes known to my family to end my life when I am ready. People who say people who feel a burden were be vunerable. I would NEVER feel I am a burden to my family and if I am diagnosed with any degenerative disease I would want the right to end my life	For over 5 years	This is very personal but if anyone applying for assisted dying should fit all criteria ultimately they should have the right
Agree		Not Answered	

Disagree	<p>I am concerned about allowing assisted dying for a number of reasons, firstly I believe that legislative erosion can occur, where a robust scheme may be put in place but this could quickly have the goalposts moved such that a lesser hurdle exists for assisted death, whether this is by changing rules around power of attorney and terminally ill adults, whereby others can make the decision on their behalf. Or this could be around the definition of terminally ill.</p> <p>Secondly the nature of palliative care could be improved to allow for better care of those with terminal illnesses. I believe that this could be justified as an appropriate response to individuals becoming a 'burden to the state' and as a way of saving costs, human lives should not be considered like this.</p> <p>Thirdly there is an erosion of trust that could occur with the medical profession, whereby the hippocratic oath is betrayed and patients may lose confidence in the medical professionals who serve them.</p> <p>Finally, and I believe this to be the most important, is that this would reduce the value of human life and offends me deeply.</p>	Not Answered	<p>I am particularly concerned that the intention here is to become the dignatas of the Irish sea. I do not agree with assisted dying fundamentally as mentioned in question 8 and believe this series of questions should have included an option for each to abstain as a result of disagreeing with the principal of a draft Bill entirely.</p>
Disagree	<p>The sanctity of life is a cornerstone of law and ethics. It establishes the worth and value of every individual, regardless of colour, age, mental condition, physical health,etc. Once this landmark is removed and killing someone becomes possible (whatever safeguards of consent are included), a dam has been breached and the possibility will be open to people feeling their life is worthless, they are a burden on others, in short, they "should" die. I do not believe that this step represents an advancement for human society and civilisation at a time when palliative care is more effective than ever and new treatment options are being discovered. Anxiety and depression are at an all-time high amongst young people and, as any form of age discrimination is illegal, legislation aimed at providing a voluntary end to the suffering of an elderly, infirm person suffering from a terminal and painful condition would inevitably open the way for younger, otherwise healthy indivicuals suffering from depression to choose to end their lives rather than persevere through treatment options which may take a long time.</p> <p>This is to say nothing of the right of doctors to refuse to help in this way; they will find themselves subtly pressured into changing their stance or face professional impairment. Whatever safeguards are put in place cannot eliminate the possibility of abuse, or of pressure deliberate or involuntary, being felt by those who watch the inheritance they wish to give their children gradually being devoured by nursing home fees.</p>	For over 5 years	<p>Killing someone is a legal not just medical issue. Two doctors is not sufficient - there should be a legal expert with suitable training also, perhaps a larger panel involved in each case. There should be safeguards to ensure that people are neither selected nor-self selected for such a panel on a basis of their preconceived ideas about assisted dying: the ideal panel member should be against the idea on principle but willing to allow an exception in the face of unbearing and unallieiable suffering. It does not just concern the medical profession; each individual case has implications for the whole community, for what sort of society we are. The Right to Live is inalienable, but it does not presume the right to die, particularly with the help of others who will then have to live with the, at some point public, knowledge that they have helped kill someone. I don't wish ever to look at a doctor and think "He/She might kill me". I wish to see doctors and nurses as those who will strive at all costs to preserve life.</p>

Disagree	<p>There is an excellent Hospice on the Isle of Man which cares well for the terminally ill patients and their families. Assisted dying legislation opens the door to a whole host of concerns that vulnerable people may be coerced or feel a pressure to hurry their death journey in order to minimize costs to the family both monetary and emotional.</p> <p>Greater investment should be made by the Isle of Man government into hospice at home and McMillan type nursing care and not expecting charitable donations to keep the service going.</p>	For over 5 years	<p>Life is precious. In a caring society we do that, care, until life ceases. We do not kill. We nurse and care and relieve pain and love our sick.</p> <p>It's a sad society that may see the sick as an expense and drain on expensive medical resources, who should be helped to speed up their date of death.</p> <p>Hospice care on the island is already excellent, but government should enhance its capacity further by giving funds to expand the care provision into the community more than it already is so that nurse/patient/family relationships can be built up from an earlier point in the illness, not just close to the end.</p> <p>It doesn't seem safe to have drugs in the home, sufficient to cause death, if these were to fall into the wrong hands.</p> <p>It doesn't seem right to again be putting doctors in the forefront of decision making about a person's genuine wish to die. Already they are having to make those decisions regarding women wishing to terminate life before birth. When will it stop? Are doctors only going to be positively concerned for treatment, care and life from birth to 18 years of age?</p> <p>What message does this proposal give to our children? Are we now promoting suicide as a good thing? There's so much confusion in the world already with gender issues, same sex marriage, etc</p> <p>Presumably, as has been for many years, for those who are committed to accessing assisted dying/ voluntary euthanasia there will still be the option to travel to other countries where this is legal.</p>
Disagree		Not Answered	
Agree	<p>Why allow people to suffer if there is no way back for them to recover.</p> <p>Many people want a quick, dignified end to their lives.</p>	For over 5 years	
Disagree	<p>I am against Assisted Dying which in truth is Assisted Suicide. A Government trying to legalize the provision of drugs to enable suicide is DISGRACEFUL. It poses a threat to the most vulnerable people on our Island. It goes against the work of Heath Care Professionals & it is unnecessary due to the wonderful palliative care available at our Hospice</p>	Not Answered	<p>This questionnaire is biased and should not have been written by those who support assisted suicide. Which is why I have not answered some questions. I am against any change in the law. It would become uncontrollable, it is unethical, and unnecessary, and financial resources would be better spent on helping people to live well.</p>

Disagree	<p>The medical profession should be concerned with the preservation of life. In short, our joint opinion is that we do not consider advocating assisted suicide/dying to be in any way compatible with the role of ANY medical practitioner.</p> <p>In addition, there are those with a terminal diagnosis who are alone, without family back up, who might (even after counseling) feel duty bound to end their lives prematurely so as not to be a 'burden' on society.</p> <p>Having a family member with severe autism/learning difficulties, who needs round the clock two to one care, we realise only too well, that when we ourselves have died, and can no longer advocate for him, our disabled family member will be in the care of the medical and social care system. In our considered opinion, it would be a very small step from the proposed legislation to a situation whereby medical professionals could advocate ending the life of someone such as our relative, simply because they consider his life to be intolerable without any prospect for improvement.</p> <p>May I draw your attention to this case study of an autistic individual from the Netherlands, which is logged in the official health records of the Dutch government.</p> <p>https://www.dyingwell.co.uk/blog-is-it-possible-to-make-assisted-dying-laws-safe-for-people-with-intellectual-disabilities-or-autism/</p> <p>Finally, should the proposed legislation be enacted, an individual with a terminal illness, and life expectancy of say six months, may immediately</p>	Other	<p>As already stated, we are against any form of assisted suicide/dying, so questions 12, 13 and 14 are rendered totally irrelevant.</p>	<p>This consultation document/questionnaire and its wording and options for response, for the most part, assume that the legislation is already in place. For each question, there should have been a fourth option, whereby those opposed to assisted suicide/dying in any form can repeat their opposition.</p> <p>Quite frankly, Questions 9 - 27 are rendered totally irrelevant given our response to Question 8.</p>
Agree	<p>I watched my mum and husband die within months of each other and mum's death was awful, I don't want to have to suffer in the same way. My death is my business, no one else's and I resent religious and other groups thinking that their opinions over ride other people's wishes. I don't expect anyone else to do the deed but give me the means to do it myself. We treat animals better than people, you're prosecuted for allowing animals to suffer but it seems to be fine to allow people to die in pain. Palliative care isn't always effective!</p>	For over 1 year		<p>The only caveat I would make is that people with learning disabilities should be fully protected as many don't have the capacity to make this decision and are easily coerced, they already have a really poor deal from society and I don't want them disposed of. My daughter has learning disability but is a brilliant human being and makes people happy by her lovely personality, this makes her life as important as anyone else's.</p>

Disagree	<p>1. While this bill advocates for terminally ill patients only and for those only with 6 months of life left. It is very difficult to determine this with any degree of accuracy and who would this be incumbent on to decide. I have known many people who have out lived their time line with many good quality years.</p> <p>2. By putting a time limit on someone's life by definition you are putting an end point on someone's existence - a death sentence.</p> <p>3. in time there is the risk that this will become common practice for people/ relatives/ patients/ organisations in order to manage finance and resources.</p> <p>4. By only allowing this for terminally ill adults is it not discriminatory in nature and there for within a short time frame this will be challenged and altered as has happened in other jurisdictions.</p> <p>5. Is it not incumbent on society and individuals to ensure research and medicine is focussed on securing life and the best quality of life.</p> <p>6. How long will it be before suicide is permitted legally throughout society.</p> <p>7. At what point does this change from assisted suicide to euthanasia? If the patient is not able to affect the suicide themselves or it does not work - what then does another have to get involved and then it becomes euthanasia/murder?</p>	For over 5 years	<p>1. life should be held as important and not easily disposed of.</p> <p>2. I have rave concerns about the easy extensions possible to this law to eventually include many other groups of individuals as currently this is very exclusive and i am sure that will be challenged.</p> <p>3. what happens to those individuals that cannot take the tablets themselves or who only can manage half the lethal dose who is is incumbent on to sort this out and what does that look like - murder or at best euthanasia.</p> <p>4. What safeguards are in place to keep the law as it stands and to protect the patients. the families and the professionals involved.,</p> <p>5. Patients already sometimes feel like they are a burden to society what is to stop this becoming a route to take to unburden family and friends?</p> <p>6. What safeguards are in place to protect individuals in disputes and professionals who dispute the time lines.</p> <p>7 what happens in cases where there has been a time line set but in the meantime a new treatment comes on line and it could have given more time more quality life years for the patient and relatives what then of the professionals who assisted in this.</p> <p>8 how does the patient safeguard against not being given the correct information about their time line..</p> <p>9. there are far too many variables and evidence that this bill/ law has not got the safeguards in place to stop it becoming a law that facilitates euthanasia or suicide of the vulnerable.</p>
Disagree		Other	<p>I don't agree with assisted dying</p> <p>I am against any form of assisted Dying</p> <p>John Clucas</p>

Disagree	<p>A person using what they have at their disposal to kill another person is a murderer, that is the actual definition, so assisted suicide is legalising murder.</p> <p>Doctors take an oath to save life, not take it, so this should not be imposed on them. It's a terrible moral burden to place on them.</p> <p>The criteria laid down as so called safeguards is worthless. In countries which have started off with what were claimed to be safeguards, these have quickly been discarded. Belgium has liberalised more and more so that now,even children can be killed. Canada, which only legalised it in 2016, is already offering it to people with depression and anxiety, and even a paralympian was offered suicide by a Government official because of damage to her knees and spine. There is now pressure there to murder babies up to one year old if they are disabled. The suicide lobby will never be satisfied until people can be killed for any and every reason, and the Isle of Man would very quickly go down the same route.</p> <p>The criteria of an incurable physical medical condition can be interpreted very broadly, and people, especially the elderly, will be put under pressure to accept suicide. People will see it as a duty to die to stop being a burden to others.</p> <p>People would be able to refuse treatment if they didn't think it tolerable, and to be killed if they were unhappy with life. The Netherlands uses this type of approach, and their assisted suicide deaths keep increasing.</p>	Not Answered		
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Disagree	<p>Pressure from relatives or 'carers' could easily be put on those already struggling to 'hang onto life,' encouraging the dying to 'do the right thing' and remove themselves from being 'a burden of care' resulting in them believing that they have become a drain on personal and government financial resources.</p> <p>As a very experienced Registered Nurse in caring for the terminally ill whether in a hospital, private care home, hospice, or in the community at home, a dying person's request is essentially for maintained quality of life with adequate care and pain relief, which will enable them to cope. The most valuable of times for the patient and their family/carers are often the last few days when family gathers and support each other, through the inevitable loss. It is a natural caring process.</p> <p>The opportunity to 'end it all' through assisted suicide is inappropriate as it puts the dying, their relatives, and their carers, under more stress as well as increasing their short and long-term, mental and emotional pain.</p> <p>'Assisted Dying' will also put strain and pain to those entrusted with their patients well being, the GP's & nursing staff, and there are very serious ethical concerns.</p> <p>More resources should be invested in equipping the facilities we already have - not by removing the so-called 'problem' of the dying.</p> <p>It is just wrong - through and through. If introduced, this Bill will most likely initiate a slippery slope downwards, as The Netherlands statistics of 1 in 23 deaths being either by euthanasia or assisted suicide and where it has</p>	Not Answered	<p>Our beautiful Island should NOT become known as a 'suicide haven.'</p> <p>Pressure from relatives or 'carers' could easily be put on those already struggling to 'hang onto life,' encouraging the dying to 'do the right thing' and remove themselves from being 'a burden of care' resulting in them believing that they have become a drain on personal and government financial resources.</p> <p>As a very experienced Registered Nurse in caring for the terminally ill whether in a hospital, private care home, hospice, or in the community at home, a dying person's request is essentially for maintained quality of life with adequate care and pain relief, which will enable them to cope. The most valuable of times for the patient and their family/carers are often the last few days when family gathers and support each other, through the inevitable loss. It is a natural caring process.</p> <p>The opportunity to 'end it all' through assisted suicide is inappropriate as it puts the dying, their relatives, and their carers, under more stress as well as increasing their short and long-term, mental and emotional pain.</p> <p>'Assisted Dying' will also put strain and pain to those entrusted with their patients well being, the GP's & nursing staff, and there are very serious ethical concerns.</p> <p>More resources should be invested in equipping the facilities we already have - not by removing the so-called 'problem' of the dying.</p> <p>It is so obvious that the questions are loaded one way. I wonder if the proponents do not even care to follow due process. Please stop this slippery slope step.</p> <p>We have a lot of other things that we can do on the island to support people.</p>
Disagree	<p>There are arguments on both sides.</p> <p>I believe that the arguments against assisted dying have authenticity and truth in them.</p> <p>They are able to support their case with experience elsewhere.</p> <p>I think that Mr Allinson must heed to truth and evidence than his own short term personal goal.</p>	Not Answered	
Disagree	<p>I don't believe it is right for us to choose the length of our lives.</p> <p>I think we should be investing in good palliative care and social care that supports those dealing with terminal care needs. Those with long term medical needs should be cared for with compassion and dignity ensuring they have access to good medical, nursing and social care.</p>	For over 5 years	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Agree	<p>humans should be afforded better, or at worst equal rights as animals</p>	Not Answered	<p>We are dealing with the greatest gift of all, life its self, so its really important we give all humans choice. Its equally important the right safe guards are built in to protect everyone against this law being abused for personal gain.</p>

[illegible]

[illegible]

Disagree	<p>Euthanasia must not become an option for people who have a terminal prognosis. They must continue to have medical support , especially with quality palliative care , and be helped to live out their remaining days as pain-free and comfortably as possible.</p> <p>Healthcare professionals must not be put in a position where they feel "forced" (pressurised), against their better judgement, into helping anyone end their life prematurely.</p> <p>There is considerable evidence from countries allowing euthanasia, that it is likely to lead to a widening of the criteria for eligibility e.g. to those suffering from mental illness and even to children.</p> <p>I say all this without minimising the heartache and distress that may be involved for those facing terminal illness , and for their families.</p>	Not Answered	
Agree	<p>For many years I have read with interest the debate around the subject of assisted dying. I have also been mystified by the ease with which individuals or groups with their own, often hidden, agenda, have managed to prevent able minded, terminally ill people , often in great pain, from ending their lives as they choose.</p> <p>I consider in this, the twenty first century, that all people in this situation have the right to avoid a prolonged painful death often enduring months of unbearable suffering and humiliation.</p> <p>I am by no means an expert in this field. However I feel sure that those who are, will do everything in their power to enable law to be drafted to protect the vulnerable and ensure that each case of assisted dying will be dealt with correctly and humanely. I feel that this bill has been given considerable thought and any inconsistencies elsewhere have been or will be remedied.</p>	Other	<p>People returning to the island who have family here and we're born here ?</p> <p>I do not feel qualified to complete this section but cannot express my desire to see this legislation introduced on the Isle of Man enough. The need for this legislation is long overdue and well documented.</p>
Disagree	<p>Allowing assisted dying is dangerous. Changing the law opens the door to further changes. This will make a lot of people very vulnerable to persuasion. I fear for younger people in particular with anxiety and depression common problems. Feelings can change in a short period of time and people may make a decision to end their life in a 'down' phase which is not necessarily the best outcome for them if they had time to recover. People with addiction problems may be particularly at risk - the safeguards to ensure someone is in their 'right mind' could fail on occasion, and the consequences would be disastrous. No systems, however well-intentioned, are foolproof. Health and social services are already under strain and there is no guarantee that a system of authorising assisted dying would work as intended. Life expectancy is not certain - a friend of mine was given about 6 months to live - 14 years ago. This diagnosis could have robbed her of many happy years, admittedly struggling with some health conditions but happy and contented with her life and an encouragement to others. Palliative care is good and could be excellent - a lot can be done to relieve suffering without killing the sufferer.</p>	Not Answered	<p>I feel that the process above would place an enormous emotional burden on doctors and nurses and on friends and relatives of the dying person. The idea of being asked by a loved one to go to the chemist's and pick up pills to kill them is utterly beyond my comprehension. What sort of person could do that? Having lethal drugs more widely available, possibly in private homes, seems madness and a potential danger to us all.</p> <p>Statistics can be used in different ways and can be misleading: the data concerning the effectiveness of regimes in other jurisdictions can be examined and found to contain examples of very disturbing instances, eg people with dementia giving consent to die and then being unable to withdraw this. If allowed at all, the process is certain to become more widespread and will at some point become open to abuse. The surest way to avoid falling off a cliff is to not take that path at all. One step on this particular road is one step too many. The current law aims to preserve life; a law to allow killing another human being contravenes our most basic values about the sanctity of life.</p>

Disagree	I do not believe people should take on the role of God. Life is a privilege that should be cherished and valued. We are created by God. Life should begin and end in God's timing. God is in control. It is not our place to play God. All life is precious.	Not Answered	This whole survey is coercive and heavily persuasive in favour of assisted dying being passed. It works an assumption the population will vote in favour. This is wrong.
Disagree	<p>1. I feel this law would be unethical for our doctors. As somebody who works in healthcare, I have great concern regarding the effect this law would have on our predominantly our doctors, but also nurses and wider staff. I would argue that most existing doctors went into the profession because they wanted to play a role in preserving life, not in ending it.</p> <p>2. I feel this law would be unnecessary. The British Isles are currently way ahead the rest of the world in palliative care, and the modern Hospice Movement has made huge advances in pain control. Instead of investing money into assisted suicide, we could be using it to continuously expand and improve the already excellent palliative care provision centres on the Isle of Man. In this medical day and age, there should be no need for anybody to be in pain towards the end of their life.</p>	Not Answered	<p>Medicine is not black and white and sometimes life expectancy can be inaccurate. I personally am aware of multiple people who having been diagnosed with cancer who have been given a time period of which they are expected to live, which they have then gone on to well exceed. One person in particular went on to completely recover from their cancer and has gone on to live a healthy and happy life. I can't begin to imagine what that person could have missed out on in their life, had they been given the option of assisted suicide at the time they were unwell with cancer.</p> <p>Additionally, as somebody who works in healthcare I know the difficulties we have in recruiting doctors to come to the island. I believe that this could become even more difficult if this proposal were to become law, as any healthcare professional who deems assisted dying to be morally incorrect will not wish to come and work on an island where it is lawful.</p>
Agree	I have watched loved ones suffer right up to there death,if you did that to an animal you would be jailed. I have a brother at this very time,who has asked me to look into Dignitas.	For over 1 year	<p>If I was lying in a nursing home bed,having to have a hoist to get me to the toilet,unable to use a male water bottle myself and unable to feed myself... I would want to have my wishes carried out.Endless medication being given,and when pain is so bad even morphine. I visit my brother in a nursing home here on the island many times a week,with all of the above problems.His wish is to die,because he cannot get better from his illness. I have been listening to him for months,and agreeing with his wishes...but unfortunately for him he just has to wait to die.Not sure if a Living Will would be of any help.</p>
Agree	Every individual has the right to be in control their own destiny whether or not they agree with assisted dying.	For over 1 year	
Agree	Watched close relative die painfully	Not Answered	

Agree	<p>Firstly, I believe choosing to end one's life is a Human Right.</p> <p>Secondly, it is tantamount to torture to not allow a person who is suffering from serious pain or impairment, among other conditions, to die if they wish.</p> <p>Thirdly, people should not be forced to endure continuous suffering just because they are incapable of ending their lives themselves. An example of this may be a paralyzed person who would want some other person to assist them in dying.</p> <p>Forthly, if a person is unable to communicate their wish to die (e.g. a person in a coma), then, if they had previously expressed the wish not to continue living under such circumstances (or similar incapacitating ones), that wish should be accepted and acted upon. In the case where no previous such statement or wish had been made, then I believe a wife/husband or a few close friends should be able to decide to end the person's life if they believe it is the solution necessary to end the suffering, not only of the incapacitated person but also those who are suffering as a result of this situation.</p> <p>Notes:</p> <p>In question 9 below, there should be an option that allows for assisted dying regardless of the person's estimated life expectancy.</p> <p>In question 12, the answer should never depend on a person's age - surely we don't think it's acceptable for children to suffer while it is not acceptable for adults to suffer!</p>	Not Answered	<p>The medication (for want of a better word) should not be allowed to be obtained directly from a Pharmacy, nor should it be stored at a person's home - the risk of it getting into the wrong hands is too high.</p> <p>I believe a medical professional should be required to obtain the medication and be present when it is administered, or actually administer it if required.</p> <p>The questions relating to whether two doctors should verify the person's mental state should only apply to the situation where a person is capable of clearly expressing their wish, i.e. it is not necessary when the person is in a coma for instance.</p>
Agree		For over 1 year	
Agree	<p>Despite the advances which are said to have been made in palliative care in recent years, I think that it is cruel to require patients to continue living with no prospect of regaining any quality of life, long after they have had enough.</p>	For over 5 years	
Disagree	<p>I don't believe that assisted dying should be permitted on the Isle of Man.</p> <p>My father suffered from Parkinson's Disease and was allowed to be treated in Hospice many years ago. His symptoms were managed and he died peacefully without pain. I believe that it would open the door for individuals both of sound mind and vulnerable to be pressurised into choosing assisted dying if they are concerned about their family members having to look after them, or if their family members are concerned.</p> <p>Palliative care would suffer and whilst we have an excellent facility at the moment - care has been shown to deteriorate where assisted dying has been brought in. Doctors could be forced to take part in something they believe to be unethical.</p>	Not Answered	<p>Predicting life expectancy is difficult and doctors can get it wrong by months and even years sometimes.</p> <p>In all countries where such a law has been passed it has been shown conclusively that palliative care worsens.</p> <p>The use of the phrase "assisted dying" could well be twisted and diluted as has happened in other countries where for example the age has gradually been set much lower and the reasons for someone being allowed to choose to die - changing from incurable illness to "tiredness of life".</p> <p>I am concerned for people suffer with dementia etc being forced into making a termination of life decision.</p> <p>I believe that it is much more important that the quality of care someone receives in making them both physically and mentally comfortable is much more important. The IOM should be leading the way in how people are treated by improving the Manx health service and care in the community - not trying to give people the chance to figuratively "throw themselves off the rock".</p> <p>In every way assisted dying is wrong.</p>

Disagree	Totally unethical ! Where will this all end? The law will be become uncontrollable in time.	Not Answered	I do not support assisted suicide on our beautiful island. I have much sympathy for people who are experiencing severe pain due to terminal illness, however modern medicine allows for powerful pain killers. Please don't go down this route, it is unethical and the route to a downward slope for our island.
Agree	If a person is dying and wants assistance then it's their human right	For over 5 years	Am unsure of questions 22-25 regarding medication and acquiring. Surely the person should not be able to acquire the medication
Agree	Individuals who are terminally ill should be given the choice. I had a close friend in her 40s who was terminally ill with a devastating and incurable neurological disease. Her last few months were appalling both for her and her husband who nursed her at home - they both suffered greatly. She might not have wanted assisted dying but the option should have been there for her.	For over 5 years	
Disagree	<p>I strongly disagree with assisted dying on the Isle of Man. I'm deeply concerned that regardless of how hard an organisation that controls assisted dying tries there is no safeguards that can be but in place that will stop people feeling pressured either by family members or by the state to end their life earlier then naturally. Legalising assisted dying for terminally ill people also feels like a slippery slope to legalising assisted dying to disabled people and people with depression. Life is sacred and precious in all its forms. When people begin to disregard life then there is no knowing what the repercussions are.</p> <p>I strongly disagree with assisted dying on the Isle of Man. I'm deeply concerned that regardless of how hard an organisation that controls assisted dying tries there is no safeguards that can be but in place that will stop people feeling pressured either by family members or by the state to end their life earlier then naturally. Legalising assisted dying for terminally ill people also feels like a slippery slope to legalising assisted dying to disabled people and people with depression. Life is sacred and precious in all its forms. When people begin to disregard life then there is no knowing what the repercussions are.</p> <p>I am also sickened by how biased this questionnaire is. I will not be answering anymore questions beyond number 8 because this questionnaire continues on with the assumption that I agree with legalisation and that it's just a matter of in what form it is legalised.</p> <p>I am terrified our democracy is at stake when we put people in positions of power that have an agenda and will influence politics to gain what they</p>	Not Answered	

Disagree	<p>I do not believe “assisted dying,” the phrase the consultation uses for assisted suicide in the terminally ill, should be permissible for any adults, whether terminally ill or not, whether in the Isle of Man or in any other jurisdiction. My reasons are many, and I cite these below. It is unsafe. Others have coined the triad “uncontrollable, unethical and unnecessary” to refer to assisted dying. I would add “unsafe” to this.</p> <p>You cite Ben Colburn’s research report (https://policyscotland.gla.ac.uk/wp-content/uploads/2021/09/PolicyBriefingDisabilityAndAssistedDyingLaws.pdf, accessed 21/01/2023). I see that he is a member of FATE (Friends at the End) (https://fate.scot/news/fate-member-professor-ben-colburn-writes-to-editor-of-the-independent-to-refute-claims-by-care-not-killing/, accessed 21/01/2023) The long term aim of this group is to see the passing of assisted dying legislation in Scotland (https://fate.scot/About-us/, accessed 21/01/2023). As well as the research report you cite I have read a couple of further articles by him (Colburn B. Autonomy, voluntariness and assisted dying. <i>Journal of Medical Ethics</i>. 2020 May;46(5):316-319. DOI: 10.1136/medethics-2019-105720. PMID: 31719156., and Colburn B. Disability-based arguments against assisted dying laws. <i>Bioethics</i>. 2022 Jul;36(6):680-686. DOI: 10.1111/bioe.13036. PMID: 35389513; PMCID: PMC9322678, which expands the research report. He reports that for example “These findings—that there is no evidence that assisted dying laws have a disproportionate effect on people with disabilities—are echoed in all empirical studies that examine the question.” For Canada, he says, “In Canada there is comparatively little evidence yet, and nothing that specifically examines people with disabilities; but there is data that shows that—as elsewhere—uptake of assisted dying is not correlated with</p>	Not Answered	<p>I have already made most of my comments under question 8. I have left some answers blank, e.g. question 9, because giving any answer implies support for the principle of assisted suicide. I do not believe assisted suicide should be available to any people, including those under 18. Answers to question 14, 20 and 21 would have to be arbitrary. If you go ahead with assisted suicide, all patients should have an independent capacity assessment. and should all have experienced genuine palliative care; i.e. palliation of their symptoms. I also note that storing lethal doses of drugs in anyone’s home is dangerous.</p>
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	<p>Disagree i believe that we do not have the right to decide who gets to live and who gets to die, and it is unethical for a person to be given the power to make this decision. for terminally ill people, you have Hospice which provides and excellent environment and superior care in the last days, this is where additional funding is needed and not in areas promoting assisted dying. Looking at what is happening in Canada and the misguided diagnoses leading to people unecessarily being euthanised is beyond me. Life is precious and we cannot take it upon ourselves to unnecessarily end a life, families are left devastated as is with a loss, and knowing that this Private Member's bill is trying to get approved is criminal.</p>	<p>Not Answered</p>	<p>it is very worrying that we live in a society which is trying to make life disposable. Life is a precious gift. The vulernable in society will be the first 'targets' as they are regarded as a burden on the system. What of the ones who cannot make this decision for themselves, the ones with dementia? Who will protect them? They too have a value, and family and friends who dearly love and care for them. They may even be convinced that this would be the right thing to do, in any event, it is murder. I fear for the practitioners who will be implemeting this as essentially they will be responsible for the death of a person which is in their control, imagine what that will do for their mental health,</p> <p>I am very concerned that this whole process is down to one person to evaluate and review, The lives of people are in the hands of one person to decide their fate and make 'getting rid of the burden' and easy task. Assisted dying makes it sound so easy, yet is wrong in so many ways.</p> <p>The bible states that you shall not kill, have we moved so far away from our Christian roots and the foundations of the Isle of Man that we can overlook this fundamental principle, are we so open to the loud voices of the world that we will do anything and everything which goes against our beliefs to keep the voices happy and content. What will we do when the next loud voice demands something we know is fundametally wrong, will we also just roll over and appease them? When will we take a stand and say enough is enough?</p>
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Agree	<p>Dignity in Dying campaigns across the British Isles to allow terminally ill, mentally competent adults the option of an assisted death. We therefore support the introduction of a safeguarded assisted dying law on the Isle of Man.</p> <p>There is clear evidence that the blanket ban on assisted dying has failed and given rise to a number of unintended consequences that inflict an unacceptable degree of harm on dying people, their loved ones and health and care professionals.</p> <p>Over the last 25 years a growing number of jurisdictions around the world have modernised their legal frameworks in this area by implementing safeguarded assisted dying legislation. These laws are proven to offer greater choice to dying people while also improving the safety and effectiveness of end-of-life care.</p> <p>Public support</p> <p>There is strong public support for the proposed Bill. Dignity in Dying has nearly 500 supporters on the Isle of Man, who all support the principle of assisted dying legislation. Polling on the Isle of Man shows that 87% of people support a change in the law to allow assisted dying for terminally ill, mentally competent adults. 78% of people said it was important that assisted dying law change was debated during this political term. [1]</p> <p>Palliative care</p>	For over 1 year	<p>The process and safeguards being proposed are based on a law which has operated safely in Oregon, USA for over twenty five years. This model has also been adopted in 10 other states in the US, as well as all states in Australia and nationwide in New Zealand.</p> <p>Dignity in Dying strongly supports the involvement of doctors in the assisted dying process, as set out in the consultation document. Legislation would be safer if doctors are involved. These professionals have the knowledge and skills to be able to talk someone through their alternative care options, assess the person’s capacity to make a request and ensure the person has a voluntary, settled wish to have an assisted death. Furthermore, many professionals would find it abhorrent to be forced to refer a dying patient to an unfamiliar third party service rather than be able to support that person through an assisted dying request themselves.</p> <p>Doctors should be able to initiate conversations about assisted dying with their patients, if appropriate. Victoria’s assisted dying legislation restricts healthcare professionals’ ability to discuss the option of assisted dying with their patients. Research has since found that restricting conversations about end-of-life options may lead to less optimal patient outcomes. [24] We believe it would be damaging to limit the conversations that healthcare professionals can have about some end-of-life options but not others.</p> <p>On question 10 – we do not think that a health care professional should be permitted to administer medication intravenously to a</p>
Disagree	<p>I was a nurse . I was there to promote life not death . I couldn’t work as a nurse if the bill was passed.</p>	Not Answered	<p>I absolutely disagree with this bill . I worked as a qualified nurse at the hospice on the Isle of Man. Life is precious . Even in its end stages. Killing people is wrong . Health professionals should promote life in every circumstance .</p>

Disagree	<p>I believe that no human being has the right to take the life of another. At present you can have confidence in doctors because they are bound to preserve life. If they had the legal power to end life, all confidence and trust would go.</p> <p>Assisted Dying is said to be a quick, painless way out, but I understand that this is not the case, that it can take up to eight hours for the person to actually die and that it is not necessarily painless.</p> <p>Assisted Dying would put pressure on people to end their lives so as not to be a burden to relatives or society. Over half of those who decided to end their lives in Oregon did so to prevent being a burden on their families.</p> <p>According to The Guardian in 2015, 500,000 elderly people in the UK were abused each year mostly by their families and for financial reasons. The ideal answer for them would be to pressure their relative to consent to Assisted Dying.</p> <p>In countries where it has been legalised, the safeguards have been changed. How long would it be before legislation would be adjusted to end the lives of older people who are costing the Health Service?</p> <p>Also, if you should implement Assisted Dying, the procedure suggested by your questions later in the survey, are completely irresponsible. If someone is well enough to go to a pharmacy, they are not ill enough to die. When someone is diagnosed with a terminal illness, they may be depressed initially and decide to end it when they may later have had second thoughts.</p> <p>If someone can pick up this lethal medication on behalf of someone else, it is getting out into the community. I cannot believe that the Police would be very happy to have such a dangerous substance in the hands of just anyone.</p> <p>If it is possible to source illegal drugs, what would safeguard this lethal medication?</p>	For over 5 years		<p>See previous comments in the first section of the survey.</p> <p>Doctor should supervise.</p> <p>Lethal medication should not be allowed to get out into the community.</p> <p>People should be informed that it may not be a quick, painless solution.</p> <p>Safeguards should be in place for vulnerable people.</p>
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Disagree	<p>As a consultant physician in palliative care who has watched with interest other nations develop their assisted dying programmes, I am very concerned of how these have grown in terms of breadth of patients who can access assisted dying - for want of a less cliched phrase “the slippery slope”.</p> <p>Hearing about this consultation via friends, I felt morally and ethically bound to reply to the consultation to raise concerns.</p> <p>If good specialist palliative care is put in place, i do not believe the assisted dying programme is needed.</p>	Not Answered	<p>I have signed recently the “our duty of care” statement as a physician, which states as below:</p> <p>I affirm, in line with the World Medical Association Declaration on Euthanasia and Physician-Assisted Suicide (adopted by the 70th WMA General Assembly, Tbilisi, Georgia, in October 2019), our utmost respect for human life and our opposition to euthanasia and physician-assisted suicide.</p> <p>No doctor, nurse, or other healthcare professional should be forced to participate in euthanasia or assisted suicide, nor should they be obliged to make referral decisions to this end.</p> <p>Any change in the law undermines the public’s trust in healthcare professionals and would devalue the inherent dignity of frail, elderly, and disabled patients.</p> <p>The prohibition of killing is the only safeguard that will protect our patients.</p> <p>We will not take our patients’ lives, even if they ask us and the law allows.</p> <p>Instead, we have a duty of care towards those in pain and in distress, to help them to live until they die.</p> <hr/>
Agree	<p>It's long overdue. It's been debated and discussed a number of times over many years and seems to have had support throughout and yet still the law has not been introduced to allow it.</p> <p>It would be lovely if everyone could be assured of a peaceful, pain-free, dignified death if they are terminally ill or enduring unbearable suffering, but for any number of reasons this is not always the case. However, the option of assisted dying may help to reassure some people that, whilst not guaranteed, it is at least, much more likely. So I think it is very important that people should have a choice.</p> <p>I have had both personal and professional experience of being with people at the end of their life and have witnessed some brilliant palliative care leading to a 'good' death. But I have also seen suffering that has been prolonged and frankly, horrible, and where for the individual concerned, and those witnessing the distress, fully knowing there was only ever going to be one outcome, the end could not come soon enough.</p> <p>I have no idea how, when, or where my death will occur, but if the circumstances are such that I feel I want help to ease me from life due to some terminal or unbearable condition at a time and appropriate place of my choosing I want that option to be available. So I fully support the introduction of assisted dying legislation, and trust that it would include appropriate safeguards.</p>	Not Answered	<p>Whilst I understand the reasons for wanting time limits between a request for, and the provision of assisted dying, the person concerned may have been thinking about it for some time prior to making the actual request, so as long as it is fully understood that the person may rescind their request at any time, I don't see the point in making them wait an arbitrary period. What is special about 14 days as opposed to 13 or 15 or 5? The time limit could be an option presented to the individual but doesn't necessarily have to be a legal requirement. It could be 'best practice', or a guideline but not a legal obligation. I would say the same about whether or not a healthcare professional should be present.</p> <p>One of the issues that gets raised is that of coercion for people to request assisted dying, but if there is an intervening time limit between request and provision, people may equally be coerced into NOT going through with their own wishes by e.g. family members who themselves have not come to terms with the situation or for other reasons.</p>

	<div>Disagree</div> <div>It undermines the Hippocratic oath.</div>		<div>Not Answered</div>	
	<div>Agree</div> <div>I believe that a lot of people are kept alive against their will and unnecessarily</div>		<div>Not Answered</div>	<div>No . Assisted dying is wrong .</div> <div>A person should be allowed to make a statement in a will or to a doctor that if they have to go into a nursing home that they have given permission for assisted dying. A person should be able to decide this before they become ill and unable to make the decision or deemed mentally unfit to make the decision</div>
	<div>Disagree</div> <div>Having worked as a GP on the island for 18 years, I have seen the pressure individuals have felt that they are a burden on their family. I have had many long and detailed conversations about options regarding end of life and have significant experience with Isle of Man Hospice and its ability to give quality of life and symptom control. No one needs to be in pain or alone to face the challenges of impending death. I find it hard in the consultation that two doctor’s opinions are necessary for this legislation and am concerned that coercion will occur and people will feel obligated to end their own life. I am also concerned regarding power of attorney and the pressure put on these individuals to encourage already vulnerable individuals.</div> <div>I never understood why the hospice and its excellent palliative care is a charity and not a full part of the NHS and feel much more funding should be given to it so any concerns about support for those with a life limiting diagnosis could be achieved.</div> <div>The risk of extension of provision of life ending medication is concerning and in nearly all jurisdictions that have passed some form of legislation its remit has been extended.</div> <div>I am concerned this legislation will diminish the principle that all lives are equal and funding streams for care could be diverted.</div>		<div>Not Answered</div>	<div>Very one sided questions where are a lot are given over to accepting this process will pass.</div> <div>No questions on extending hospice provision.</div> <div>No clear guidance on nursing home provision .</div> <div>No mention of psychogeriatric input.</div> <div>No mention of funding implications for a lot of very difficult assessments.</div>
	<div>Disagree</div> <div>As a soceity we either value human life or we do not. Once it is conceded in principle that some lives are expendable, or that some people have lives that are no longer worth living, the legalised killing of patients by medical professionals will inevtably be expanded. It must be rejected entirely.</div>		<div>Other</div>	<div>The entire premise of these questions is that there are safeguards that can be put in place to ensure that "assisted dying" will only apply to the terminally ill, that it will not prey on the vulnerable or that it's scope won't be extended to the disabled/mentally ill and children. But this is false, and flies in the face of all the evidence from countries who have introduced assisted dying. Everywhere it has been tried it is inevitably expanded. You have to reject the premise, killing a patient must never be deemed a legitimate medical procedure.</div> <div>Perhaps the most illustrative part of this consultation is that you have even asked about the possibility of extending this legalised killing to under-18s. What may start as an attempted to allow people to alleviate suffering will inevitably, by force of logic and driven by overwhelming economic incentives, devolve into the mass killing of the most vulnerable in society who are deemed a burden.</div>

Disagree	<p>I am not a religious person in my views are in no way based on any religious beliefs.</p> <p>This is not a matter to be set in law. Some issues are best left as they are and I believe this is one of them. The views of our palliative care consultants and the Hospice movement in general should be followed in this matter and they are NOT in favour of this bill. I firmly believe that some of the old, the sick and the poor may well feel an obligation to end their lives if this matter is legalised. Lawyers will start to argue the meaning of “terminal illness”. The proposed wording “and for connected purposes “ is open to endless interpretation.</p> <p>Do we really want the Isle of Man to become known for being a place to be helped to die? I can already see the headlines.</p> <p>I am shocked at the way in which your survey questions are based blatantly on the premise that respondents will be in favour of the bill - and that, in itself, is deeply concerning. I would like to know how it can be justified.</p> <p>I believe that the attempt to bring this bill forward may result in the normalisation of the process of reducing the elderly and infirm headcount which some already see as a drain on the economy.</p>	Not Answered	
Not Sure	<p>It depends very much on the individual’s circumstances. If assisted dying bill came into being there could be a danger of some medical professionals thinking they are above the law and there is a concern that they would administer injections to people just because they are old and a burden to society or the old people think they are a burden to their families and will ask to be killed</p>	For over 5 years	
Agree	<p>To stop unnecessary prolonged suffering. It is inhumane.</p>	Not Answered	<p>Signed authorisation by person, two doctors and one further independent person.</p>
Agree	<p>The status quo is , if not causing , then facilitating or allowing great pain I have a friend with motor neurone, she’s terrified of the future & not being able to control her end</p>	Not Answered	<p>I’ve come to the conclusion that assisted dying has very little to do with death and a lot to do with life</p> <p>The flyer which the government distributed to homes was so biased against assisted dying , it was shocking</p>
Disagree	<p>Assisting people to commit suicide is an offense to the sanctity of life. People may be under pressure to agree to it if they consider their lives to be a burden to others.</p>	Not Answered	<p>I am unable to answer any of the questions apart from question 1 as they are totally biased and based on the assumption that assisted suicide is acceptable. In my view the draft bill should be rejected.</p>

Agree	<p>I fully agree with changing the law to permit assisted dying for those with a terminal illness on the Isle of Man.</p> <p>I have seen first hand when a friend was allowed to suffer against their will - this is unacceptable.</p> <p>Number 9 in the survey asks if there should be a limit on their life expectancy, there is no space to write other than 6/12/longer/not sure. There is not the option re limit of life expectancy to be more than 12 months, someone with a debilitating, degenerative disease should not need to suffer until a 12 month life expectancy is agreed.</p>	Other	<p>Initially this should be permitted for Isle of Man residents only, with a review in a certain number of years</p>	<p>I am completely in favour of the assisted dying bill being passed.</p> <p>It is difficult to complete the survey as only gives options of yes/no/not sure. If given the option some of my responses would be 'other' with an added comment such as 'if requested' therefore some questions have been answered 'not sure' in place of this.</p>
Disagree	<p>It is not necessary to add to the present system as palliative care is enough. Also it is dangerous because it exposes vulnerable people to huge risk.</p> <p>People are too complex for this system to be ethical. Nobody, including any amount of doctors or psychiatrists could fully understand a person's motive to end their life. It is not always obvious. people could be vulnerable depending on the relationships they have, ie in their family. For example, there could be a slightly overbearing daughter who could influence the parents decision and perhaps the daughter isn't even aware she is doing this. or, a husband who can't bear to see his wife in pain anymore but she is clinging onto life because she is strong. An onlooker can't always detect vulnerability, so that leaves the system of an option of suicide open to abuse. It can't be "water tight" therefore it can not be.</p> <p>Palliative care ie the Hospice should be able to meet peoples needs at the end of their lives and I am sure they do. People have spoken highly of the service. There should be no need for the option to end ones life when this care is so good. There is already a good system in place, so why change.</p> <p>Looking at other countries where Euthanasia has become legal, there have been increased suicide rates because life has been devalued. The culture has normalised suicide. Also in these countries, the initial law has been realised to be inflexible so gradually further laws have been made where it has become easier to take life away. This is why I am against any new legislation of this kind; initial and seemingly innocent law can escalate into a dangerous shift in cultural attitudes and care.</p> <p>Finally, it is very unfair for doctors to have to face this proposed change. Many choose this career to save life.</p> <p>I have worked in psychiatry in the UK and in my experience, staff were</p>	Not Answered		<p>I have skipped the above questions because they are not relevant for anyone who disagrees with "assisted death". Calling it assisted death is misinforming because people think that it is to gently let a person pass away. However, this system is already in place. What is being suggested is assisted suicide because the individual chooses to and is given means to end their life.</p>
Disagree	<p>Having previously worked in the police force , I have seen several situations where vulnerable people have been forced into situations that they may not be fully aware of</p>	Other		

Disagree	<p>Humanity has been created in the likeness of our creator, God. All life is therefor sacred, from conception until natural death.</p> <p>Once any “legalized assisted dying “ has been passed, even with possible legal parameters,(“legal” to a govt.) Nothing would prevent a more inclusive, or mandated requirement for all <sooner or later.</p> <p>The determined language utilised in this potential tyrannical opening of legislation, avails itself to more control of citizens thought & life itself.</p> <p>Language is to be precise, without adding confusion, however; selective interpretation has been worldly challenging reason & rational thought to confer acceptance/compliance with insidious programmed” deep state”, groupthink. (Think is operative word).</p>	For over 5 years	<p>Concerned & Disappointed in the reality that Manx government has chosen to align with a process to “provide” assisted Dying in draft.</p> <p>Now, after actively promoting,” providing” MANDATING COVID EXPERIMENTAL JAGS, (never a vaccine, again, imprecise language To maximise body & thought mass think.</p> <p>Promoting abortion here over the years.</p> <p>Isle of Mann risks among deeper, darker transhuman considerations, Of rapidly becoming Isle of Death.</p> <p>AWAKE, arise from your accepting duplicating,” this lost world’s “methodical mantra..</p> <p>Isle of Mann , become & remain a Beacon of Life!</p>
Disagree	<p>We, as a society need to value life and enable those with life limiting conditions to live as well as possible, for as long as possible .</p> <p>We should be funding excellent palliative care and ensuring easy access to that care.</p> <p>Assisted dying in other countries such as Canada and Belgium has been shown to be the start of a process that devalues life, that exploits vulnerable people and that brings a financial element into the equation.</p>	Not Answered	<p>I am concerned that the whole tenor of the consultation is geared towards the assumption that the principal is approved and the consultation is merely about the details.</p> <p>This proposed legislation will lead to a society which fails to protect its most vulnerable citizens and where the mentally ill, the disabled and the disadvantaged are at risk of being encouraged to end their lives rather than burden society. This is not progress and there is no room for it in a civilised nation.</p>

Disagree	<p>I firmly disagree with the proposal of permitting assisted dying in the Isle of Man, for many, many reasons.</p> <p>I believe all efforts and resources should be directed to palliative care and not into allowing the Isle of Man to become a destination for death tourism. Assisted dying is not progressive and forward thinking, It is unethical to the core. With the outstanding facilities and care currently given on the island, there is no need for death to be painful.</p> <p>My grandmother went through bouts of depressive thoughts in her last 6 years alive. During these periods she expressed to my father (her son) that she felt she was a burden on the family and wished she could just die. However, as these bouts passed she was able to see how she was not a burden on us at all. She was able to meet 5 new-born grandchildren which provided her with immense joy. Every effort should be driven to preserving life.</p> <p>In this, I uphold the words of world renowned physicist and atheist Stephen Hawking, who held one of the most prestigious academic positions in the world. After being diagnosed with a neurodegenerative disease in his 20s and given only years to live, Hawking famously stated "However bad life may seem, there is always something you can do and succeed at. Where there is life, there is hope".</p> <p>I also think it is worth mentioning these questions have been posed in the most unclear manor; aiming to catch people out and restricting their response.</p>	Not Answered	<p>These questions have been presented in a very unclear manor. Most people answering will not be aware they only need answer until question 8 if they disagree.</p> <p>The multiple choice responses were restrictive and I believe they aim to trip-up those answering.</p>
Agree	<p>Having had family members suffer tremendous pain towards the end of their life, I think it is all our rights to be able to decide when enough is enough and be able to go peacefully.</p>	Not Answered	

Disagree	<p>My greatest concern is for the negative impact the proposed Bill would have on vulnerable people on our Island.</p> <p>Two Biblical commands have a particular contemporary relevance to this issue. Firstly, “Do not kill” is a baseline which has served us well. History, and increasingly, the experience of jurisdictions such as Oregon, Canada and the Netherlands, show us that once this foundation is eroded, previously unthinkable choices become normalised, and we become desensitised, losing the high value we place on human life.</p> <p>The second command, “Love your neighbour as yourself,” reminds us that our choices are not simply about personal autonomy, but also the effect on others. The dangers of abuse, coercion or just a sense of duty to no longer be a burden, are real and well documented. For those with mental illness, disability, or at times of great stress and challenge, the proposed Bill would present a real danger.</p> <p>Anyone with unrelieved suffering of any sort needs to be met with compassion, sympathy and understanding. For the sake of all in our Island, we need to work with all our strength to remove the suffering, not the person.</p>	Not Answered		
Agree	<p>In these modern times, it is time that people are able to make this choice for themselves. Some illnesses are a living hell and anyone who would like to be released from these conditions should be able to have that choice. After all, we can choose this for our pets but not ourselves. Having seen friends and family with some of these illnesses I don't want my life to continue like that.</p>	Not Answered		

Disagree	<p>I believe it is questionable whether there is such a thing as a 'right to die' at all. But the real question is, do I live and die purely for myself, or for others?</p> <p>My supposed right to die will inevitably have an impact on other people, and those other people will inevitably be vulnerable - either elderly, or infirm, not to mention the disabled. No right-minded person wants to be a burden, but a caring society carries each other's burdens gladly and it does us good to do so. Conversely, in an Assisted Dying society, being a burden is a cardinal sin worthy of death.</p> <p>This nation's laws are still largely based on the Bible, which says 'you shall not kill'. That includes the prohibition against killing ourselves. And whatever your view of the Bible, it and the law as it stands in our nation that is based upon it, provide a bulwark or safety barrier. Those who campaign for Assisted Dying tell us there will be safeguards and that no one will be put under undue pressure. But that is naïve at best and a downright lie at worst. It is simply the idea that matters – as soon as the bulwark of the law protecting people is taken away, and the legal possibility of being assisted to die is introduced, there will be those who will feel an obligation to do away with themselves simply because the possibility is there. And then there will be others who will manipulate and take advantage of the elderly or infirm to pressure them to do away with themselves for their own advantage. Do we want to live in that society?</p> <p>Every life is precious - even, or despite, when there is pain and suffering - we must never lose sight of that. However we may feel, there is no such thing as a life not worth living.</p>	Not Answered		
Agree	To empower those who possess the intellect but not the physicality to have the final and most important say in their future	For over 5 years		
Disagree		Not Answered		
Agree	<p>I'm 64 years young, active & enjoying life, however, I have sufficient exposure to friends, family & colleagues (now deceased) who have suffered with terminal health issues & experienced loss of dignity, control, quality of life, ALL those affected & their close family members (bar one & that is what choice offers) expressed a swift exit plan to bring their suffering to an end.</p> <p>Both my husband & I have had a long term belief that we should be entitled to control over the end of our lives</p>	For over 5 years		

Disagree	<p>"Assisted dying" is a misnomer - this is assisted suicide. I am fundamentally opposed to vulnerable individuals being given any encouragement to take their own lives. Providing support, however limited, for people to take their own lives, is fundamentally inconsistent with efforts to prevent vulnerable and troubled people from committing suicide.</p> <p>I fear that the potential for assisted suicide will lead to abuse with vulnerable persons being subconsciously pressured into taking their own lives for a variety of reasons. Evidence from Canada in particular suggests that this has been the experience and people are beginning to question whether there can ever be enough safeguards to give confidence that there will not be abuse.</p> <p>I also believe medical professionals who are committed to saving life and preventing suffering, should not be placed in a position where they directly or indirectly assist in a person's suicide. Their role is to heal, and to relieve suffering, not kill.</p> <p>This consultation is fundamentally flawed in that a number of the questions presume support for the principle by seeking views on safeguards. I am wholly opposed to assisted suicide and no safeguard can render the principle acceptable.</p> <p>A number of the countries quoted as legalising assisted suicide only appear to legalise medical intervention which may inadvertently expedite death but which are primarily intended to relieve pain. That is an important distinction. Such intervention, which is intended purely for the patients well being, are understandable and not objectionable.</p>	Not Answered	<p>Questions 9 -28 all presume support for or acceptance of the principle of assisted suicide. I have therefore only answered those questions where opposition to the principle cannot be misinterpreted as acquiescence.</p> <p>Although the House of Keys has given permission to a member to introduce a private members bill, this consultation should not have been accorded greater credibility by appearing on an official Government website and by copies of it being available from the Tynwald Secretariat.</p> <p>Furthermore the responses will, it is understood, only go to the private member wishing to introduce the bill whose analysis of the responses to a flawed survey is unlikely to be objective, but may be accorded greater authority than it should have. He may be motivated by altruism -sadly I believe he is mistaken.</p> <p>Legalising assisted suicide, even with the most rigorous safeguards, would inevitably open the door to abuse, and subsequent extension or relaxation of what may initially have been intended to be strictly limited exceptions.</p> <p>I strongly believe that life should be valued and protected, not destroyed prematurely. Any departure from that principle would create a dangerous precedent.</p>
Disagree	<p>I find it difficult to argue in favour of assisted suicide. Whilst I cannot speak to the mindset of those who are terminally ill and requesting the procedure, I feel it is morally and ethically questionable at best to have other people assist with the process in any capacity.</p>	Not Answered	
Agree		Not Answered	<p>I strongly believe that under certain circumstances of immense suffering and/or terminal illness, individuals should have the right to make a choice to die. Some conditions are not terminal within 6 months, but continue to cause extreme distress/pain and awful quality of life for the individual for many years, as well as significantly affecting others around them.</p> <p>This may include Motor Neuron Disease, severe chronic pain with no cure, as well as terminal illnesses. We are much kinder to animals who suffer under these circumstances, and we should also allow the same kindness to humans.</p>

Disagree	<p>Assisted suicide which is what assisted dying is as seen in countries around the world e.g. Canada is very difficult to control.</p> <p>It is not ethical and would cause much emotional and ethical pressure on patient , family. medics alike. It devalues life.</p> <p>As a world leader in the palliative care the UK could and should be focusing on developing palliative care even further and supporting that financially.</p>	Other	<p>as long as it is found to discourage suicide tourism and migration.</p>
Disagree	<p>https://consult.gov.im/private-members/assisted-dying/ According to this article the Isle of Man wishes to follow the example of countries such as Canada, who have legalised Euthanasia.</p> <p>If Canada is an example the Isle of Man government admires in their adoption of the policy of Euthansia, then it's only fair we draw our evidence from there. In Toronto, 61-year-old Alan Nichols had a history of depression and other medical issues, none of which were life threatening. In June 2019, he was hospitalised over fears he might be suicidal, and he asked his brother to help him leave the hospital. Nichols' family warned health authorities that their dear relative lacked the capacity to understand the process and was in no way suffering unbearably. One month later Nichols submitted a request to be euthanised, and despite persistent protests from his family and nurse practitioner, he was killed. His application for euthanasia listed only one health condition as the reason for his request to die. Depression? No. Other mental illnesses? No. The one health condition which was accepted as good reason for him to die was: hearing loss.</p> <p>Hearing loss. To put that in perspective, I am deaf in one ear, and apparently, old enough to get someone to legally put me to death in Canada for this reason. Is my life so devalued because I suffer in the same way Alan Nichols did? What if ENT had recommended me killing myself? Because that's practically what hospital staffers suggested to Nichols. His family took the situation to the police, explaining that Alan wasn't taking his required medication, wasn't using his cochlear implant that helped him hear, and the hospital staff improperly helped him request euthanasia.</p>	Not Answered	<p>https://consult.gov.im/private-members/assisted-dying/ According to this article the Isle of Man wishes to follow the example of countries such as Canada, who have legalised Euthanasia.</p> <p>If Canada is an example the Isle of Man government admires in their adoption of the policy of Euthansia, then it's only fair we draw our evidence from there. In Toronto, 61-year-old Alan Nichols had a history of depression and other medical issues, none of which were life threatening. In June 2019, he was hospitalised over fears he might be suicidal, and he asked his brother to help him leave the hospital. Nichols' family warned health authorities that their dear relative lacked the capacity to understand the process and was in no way suffering unbearably. One month later Nichols submitted a request to be euthanised, and despite persistent protests from his family and nurse practitioner, he was killed. His application for euthanasia listed only one health condition as the reason for his request to die. Depression? No. Other mental illnesses? No. The one health condition which was accepted as good reason for him to die was: hearing loss.</p> <p>Hearing loss. To put that in perspective, I am deaf in one ear, and apparently, old enough to get someone to legally put me to death in Canada for this reason. Is my life so devalued because I suffer in the same way Alan Nichols did? What if ENT had recommended me killing myself? Because that's practically what hospital staffers suggested to Nichols. His family took the situation to the police, explaining that Alan wasn't taking his required medication, wasn't using his cochlear</p>
Agree	<p>I believe you should have the right to choose.</p>	Other	<p>To anyone who has made the Island their permanent home.</p> <p>Q 19 - you may not be capable of signing a document. Q 25 - dying should be at the time you want and not dependant upon a health care worker being present, unless you want them there. Q 26 - I would be concerned that the number of people in the annual report could mean they (the surviving partner for example) are able to be identified and subjected to unwanted contact from religious groups etc.</p>

Agree	Having had the trauma of watching my Father die in agony from the ravages of cancer, I would not want to subject myself to the same process of dying in that way. When reaching that point I would wish to have the ability, should I wish at the time, to end my life with dignity and without pain.	For over 1 year	Q15 - the need for two doctors could introduce unacceptable delay - it's hard enough to get one at the best of times. Perhaps another non-medical clinician could act as second in this case.
			Q17 - much the same as above - delay could be unacceptable to the person wishing to end their life. There isn't much Psychiatry accessibility on the Isle of Man.
			Q25 - the individual may wish to not have non-family members present.
			Q26 - there is a danger that this could identify the individual, as there will be a very low number annually.
Agree		Not Answered	
Disagree		Not Answered	
Disagree	I believe assisted dying is morally unacceptable to take into our own hands. I also think that besides question 28 this is an EXTREMELY biased questionnaire filled with snares and traps.	Not Answered	I am strongly against assisted dying.
Disagree		Not Answered	I haven't replied to the questions where you have not provided an answer I agree with. I know you do not need to be unbiased, but, if you truly want my opinion, you need to provide sufficient options.
Disagree	The vulnerable will be at risk from coercion or obligation to end third lives. Countries where it is legally permitted do not maintain the limited restrictions expected, the 'slippery slope' argument is valid. The clause saying 2 doctors must agree... is followed by a statement saying if one does disagree, a psychiatrist will be referred, thys nullifying a so called safeguard. I am horrified to think I could live on an island where the medical profession can justify suicide and society views human life as disposable rather than valued and worthy of protection and support. The existing laws are reasonable.	Not Answered	It is impossible to answer questions 9 onwards, they all assume support for the bill! How such a questionnaire has been allowed by government to be a fair consultation process is beyond belief. It is underhand and misleading.
Disagree		Not Answered	

Disagree	<p>I am writing to you regarding the proposed introduction of an assisted suicide law.</p> <p>As someone who experiences chronic health issues and have done since birth, I often struggle with feels of being a burden on society. The thought of legalising euthanasia in the Isle of Man would only add to this feeling, not only to me but anyone who has any number of chronic health conditions. It seems to me to be a slippery slope and fear it would lead to further stigmatisation of people like me who are living with chronic health conditions.</p> <p>Furthermore, I don't understand where the government would strike the balance of putting money into funding mental health if they are on the other hand allowing people who want to "end it all" the ability to do so. This is a contradiction of ethics, and I'm not sure how they would reconcile these two opposing viewpoints.</p> <p>In the early 20th century, demagogues convinced almost an entire nation that "this category of people" namely the terminal ill, disabled etc were a burden on society and therefore were a burden on finances. This kind of thinking is not only dangerous , but inhuman. No life is a burden, every life has value and a purpose, whether that individual believes it or not.</p> <p>I know that every day I am alive is another day that I am loved; and another day that I can love others. Euthanasia may seem like a solution for some, but it is important to remember that every life has value, regardless of the</p>	Not Answered	<p>I find this questionnaire extremely unambiguous, as though the decision has already been made to go forward with the bill.</p> <p>The Hippocratic Oath Declaration states:</p> <p>I solemnly pledge that I will do my best to serve humanity – caring for the sick, promoting good health and alleviating pain and suffering. I will care for all patients equally and not allow prejudice to influence my practice.</p> <p>I really don't see how it's possible for a doctor to keep this oath, if they are being asked to willingly participation in actions, knowingly resulting in the death of another human being?</p> <p>May God give you the wisdom to cherish life and know His love and glory even in suffering!</p>
Disagree	<p>Because life and death are too serious an issue. Even with the best will and with all intended safeguards, it is impossible to make legislation future proof. E.g. the 1967 Abortion legislation by David Steel was never expected/intended to become so widely permitted but generations later, acceptance of the premise leads to further additions to what will be permitted/accepted.</p>	Not Answered	<p>As stated previously, I don't agree with the proposed Bill so further comment on questions 9-27 would seem counter intuitive. According to the Hippocratic oath, no physician 'should consider anything deleterious... or be 'administering a deadly drug' I would have no objection to someone choosing palliative treatment to relieve suffering which may shorten life. Or to refuse treatment that would extend a poor quality of life. This is different from an act specifically to end life.</p>
Disagree		Not Answered	<p>I have to disagree in principle as I feel the starting point ought to have been the setting up of a specific ethical committee then a wider ethical consultation on "assisted dying" to be certain that before such a bill is put forward the ethical ramifications of this issue are fully explored first.</p> <p>In the past, ethical clarification appears to have post dated practices and some legislation eg Liverpool care pathway, some issues surrounding IVF which have led to problems after the fact.</p>

Disagree	<p>Assisted Dying? No.</p> <p>What is being proposed in this Bill is Assisted Suicide ie someone being “helped” to end their lives. Providing a “lethal” drug for someone to end their life is in my opinion Assisted Suicide or Euthanasia. Calling it “Assisted Dying” is just trying to soften the severity of the action.</p> <p>Yes, many of us know of people who have been terminally ill and may have chosen to die due to their suffering (or whose family may have thought it could have been the best option for them). But these are few in comparison to the many vulnerable people that this proposed legislation could affect (negatively) in the future. Once legislation is passed, one would be very naive to assume that it would remain the same in the future.</p> <p>We all know that legislation changes, and grows trying to include various scenarios and people in our society. Currently this proposal has so called “safeguards” in place. It is aimed at those terminally ill people of sound mind who are able to choose euthanasia for themselves but this will inevitably stretch to include people who are mentally ill, chronically ill, disabled, who have dementia, those who may be bedridden or just purposeless and feel that they are a burden on society, on their families, on the government, on the NHS and it may even include children (as in the Netherlands). The law has changed in other countries that support assisted suicide and euthanasia (or is in the process of being changed) from what it was, to include people in these categories.</p> <p>If this proposed Bill is made law, “benefitting” those of sound mind who are terminally ill, and in great suffering, that sounds almost humane for now. But what about the future, what about those who are:</p> <p>Mentally ill – why should they not be allowed to choose assisted suicide as</p>	Not Answered	<p>As I do not agree with assisted dying/assisted suicide/ euthanasia (AS&E) for anyone, I have chosen not to answer certain questions - those with a bias towards AS&E and those which assume some agreement with this proposed legislation (which I do not!)</p> <p>Who would make the decision that assisted suicide for a particular person is permissible, provide or administer the lethal drug? A doctor? Two “independent” doctors? Healthcare assistants? In my opinion a doctor that is willing to compromise on their ethics and conscience to assist in suicide, may also be willing to be complicit in a request to deem a patient “suitable” for assisted suicide even though in reality the patient may not be, (according to the proposed consultation). I would question the integrity of any healthcare professional who is willing to assist in suicide.</p> <p>Even though healthcare professionals may not initially be expected to participate in an assisted dying/suicide program (see Q16), this will inevitably change as it has done in Canada and Belgium where doctors have been required to make referrals to doctors willing to process AS&E requests. Some institutions are being forced to to allow AS/E on their premises, those who refuse to are losing funding and increasingly pressure is being placed on doctors to raise the option of AS in consultations. It is my opinion that this sort of pressure and expectation should definitely not be put on any healthcare professionals!</p> <p>The only sort of assisted dying that should take place is that the very best palliative and social care should be provided for the terminally ill</p> <p>I am concerned that the IOM will not be able to recruit to an already depleted and stretched health service as it may become a requirement for medical staff to administer or support assisted dying.</p> <p>I have found this questionnaire to be biased in it's construction as many of the questions which some people will automatically feel they should answer are skewed eg: length of life expectancy, residency requirements, etc if answered suggests that the person answering is in favour of this legislation. There should be an additional response to each question of "am not in support of this proposal".</p>
Disagree	<p>Having personally known people with a terminal diagnosis go on to live way beyond their life expectancy.</p> <p>I have read case studies of countries where assisted dying is legalised that shows it is open to abuse eg: being extended to people who are deemed to be a burden to family and society who may feel pressurised to make this decision to cut their life short.</p>	Not Answered	

	Disagree		Not Answered	<p>I am disappointed by the content of this consultation. The questions and wording are extremely biased and does not allow for a full and fair consultation on this subject. I firmly object to assisted dying, and do not believe my views were captured by this consultation. The majority of questions are written from a perspective that assumes the individual completing the consultation is in agreement and want to engage in the details of how assisted dying will be implemented. I feel as if my views have been discounted, not valid and not heard. I am deeply concerned by the way this sensitive subject has been handled. I expected better of a consultation published on the IOM Government Consultation Hub. The results of this consultation should not be used in support of the assisted dying bill, as due to the poorly structured consultation, they cannot be proven to be fair and objective.</p> <p>This level of bias and poor consultation on any subject, should never be allowed to happen again.</p>
	Disagree	<p>I feel that all efforts should be directed in supporting people through the their final stage of life via palliative care either at home or in Hospice. People are fearful of the dying process or being in pain or seeing the effect that their decline has on loved ones.</p> <p>If these concerns were more fully addressed the terminally ill may be more inclined to to want to make the most of their last stages of life rather than cut them short.</p>	For over 5 years	<p>I feel that the majority of the questions in this consultation are weighted towards agreement to the Bill. For those of us who oppose the Bill there is no choice in a number of the questions to make that clear.</p> <p>For example, question 12 concerning the the age limit for assisted dying, I felt obliged to answer 'yes' over 18 years in case the Bill is passed. Looking solely at this question it appears that I therefore support the Bill when in fact I don't support it at all.</p>
	Disagree	<p>Killing people is wrong.</p> <p>Killing yourself is also wrong, though I do not think it should be illegal.</p> <p>Societies which admire suicide, like Samurai Japan or Ancient Rome hold the life of others cheap as well</p>	Not Answered	<p>All these questions except those I have answered assume that we wish to provide assistance to suicides. I do not want this proposal enacted in any form.</p>
	Disagree	<p>Life is a precious commodity that should not be ended at the say so of medics, who have personal values, principles and morals that will affect their judgements.</p> <p>We have invested much time and resource into preventing suicide. How is assisted suicide therefore deemed as appropriate in any situation?</p> <p>I have worked with over 65 year olds for 11 years to date. In my role, I meet many people who already feel like a burden to their families. Assisted suicide could be an additional pressure at play when decisions are made around wills, advanced directives, not being a burden on younger family members.</p> <p>Legislation is not fool-proof. In every country/state that has legalised suicide there is evidence that the initial tight scrutiny to safeguard people was eroded and evolved into much looser principles. This has impacted on those who have been depressed, disabled or older and frail.</p>	For over 5 years	<p>Better to invest in enabling people to live life to the full right up to the end...e.g. invest in Hospice Care that is available to all.</p> <p>If we cared more for our citizens when they are alive, with more spending on improving health and social care options offered in the right place, at the right time, it would be way more palatable than spending money on drafting an assisted 'dying' bill.</p> <p>Has Dr Allinson got nothing better to do with his time than chase after some personal agenda for his own gratification and grandiose ideations?</p> <p>I am not impressed with the layout or content of this consultation...very loaded and not as transparent as I would have hoped for.</p>

Disagree	<p>I believe that life is precious and that all should be done to promote life. The moment that a person assumes the right to choose when someone should die marks the beginning of a demise of society where life itself is not considered something to be preserved and cherished.</p> <p>I also believe that on an island where the services for mental health are so stretched, that there are individuals who have a terminal diagnosis with input from mental health services would choose life, but without may be inclined towards the option outlined in an assisted dying opportunity.</p>	Not Answered	<p>I believe that the IOM will become synonymous with assisted dying and this will have a seriously detrimental impact on an already floundering tourist trade.</p> <p>I find the survey to be flawed by the use of questions which are written in a way that only offer options of response in the affirmative for assisted dying ie: there should be a response option against each offering a "disagree with the proposal altogether".</p>
Disagree	<p>I believe a Law on Assisted Suicide – the Isle of Man is masking the intention if they refer to the law as the Law of Assisted Dying – will be both Dangerous and Unnecessary. Dangerous because once legalised the initial intent of the law can in years to come be stretched to remove or weaken initial safeguards. In time it will be inevitable that practice will show no desire to stop what the law has allowed to start. Suicide is not the only option and it is not inevitable for people with serious mental condition or terminal illness. Diagnoses are proven incorrect, miracle cures happen, ill people can participate in medical trials to further medical research. Time at end of life allows for personal reflection and where possible, reconciliation. Why rob someone of this by “offering” an alternative opt-out that is suicide.</p> <p>It is unnecessary because current practices in palliative care, hospice treatments, sedation and pain management work well and continue to work. Life is sacred and life and death is in the hands of our Creator. Costs, inconvenience, prevention of abuse of the vulnerable and aged are not reasons to introduce a “legal” option for people to take their own lives. Coercion will occur and this must be prevented. Good law allows for judgement and discretion to be passed in exceptional circumstances. Assisted Suicide once abused, and it will be abused, will lead to the premature loss to the development of the human race.</p> <p>What is wrong with the motto – We will help you live before you die!. Dying with dignity exists today, is valued by society and is invaluable to those loved ones left behind.</p>	Not Answered	<p>I have chosen not to answer any of the questions offering options. I am opposed to Assisted Suicide so therefore have no need to even consider the "ethics" or "options" set out. The decision to allow assisted suicide and the "law" to try to legalise this cannot be shaped by answers to 20 questions. This is life not a quiz show!!!!!!</p>

Disagree	<p>I believe this move would be the start of a slippery slope towards patients feeling pressure to accept "suicide", out of fear of unknown symptoms of their diagnosis and not wanting to be a burden to family, friends or the state. As a retired nurse, I know how inaccurate doctors' estimates of life expectancy can be. I have seen many patients live longer and with better quality of life, than they had initially envisaged; clinical depression is common in those with a diagnosis of cancer, and causes a clouding of decision-making skills. I have had the privilege of seeing patients adapt to their situations, with great medical, nursing and psychological support, allowing them to share precious time with loved ones, and I have seen beautiful reconciliations develop over the course of an illness. The normalisation of premature chosen death, would in my opinion, be a threat to how we view and value each other and life itself.</p> <p>The additional time and emotional pressures on and assumptions made about health professionals' willingness to take part in the proposed procedures leading to "assisted dying" would surely be better spent in increasing palliative care provision and offering time for exploring patient's choices about treatments and care in the event of life limiting illness.</p>	Not Answered	<p>I do not feel it has been easy for the majority of people to engage with this consultation. Those who are not computer literate struggle with the thought of an on-line survey.</p> <p>The hard copies of this questionnaire are in a very small sized print and require someone making a journey into Douglas to obtain the forms. The questions definitely presume that those taking part are in agreement with the proposed Bill. And there has been a discrepancy in the on-line questions and the hard copy forms.</p> <p>Although you state that palliative care has continued to be well funded and progress in countries where assisted dying is legal, there is also documentation contrary to this belief.</p>
Disagree	<p>Terminally I'll patients should be cared for with dignity and given whatever medication needed to keep them comfortable.</p>	Not Answered	
Disagree	<p>My family has personal experience with the Isle of Man's palliative care provided by Hospice and, from this personal experience, I strongly believe that this care was of such a high standard and gave my family such peace of mind in my grandfather's painful last days that assisted dying is an unnecessary measure that would, equally, decrease the emphasis on this palliative care which can ease suffering and provide support in a way that assisted dying inherently does not.</p>	Not Answered	
Disagree	<p>I believe that the sanctity of life is threatened by the legalisation of assisted dying. Regardless of any so-called safeguards that may be put in place initially I believe it likely that these will be weakened over time as vulnerable individuals would begin to feel obligated to 'choose' assisted dying to avoid becoming a burden. We should instead be working to provide the very best palliative care available in the 21st century and protecting the vulnerable from those may seek to assist their assisted death.</p>	Not Answered	<p>I do not agree with the process to provide Assisted Dying because I do not agree with Assisted Dying and as such I have not been able to answer those questions in this survey that seem to presume my prior agreement.</p>

Disagree	The killing of another human being is an evil act, whatever the circumstances. All evil acts cannot be contained by safeguards or boundaries. They are open to abuse and put vulnerable people at risk. The promotion of euthanasia or assisted suicide always starts with the hard cases of those with terminal illness and unbearable pain but we have seen in Europe and Canada that it has now been extended to the chronically ill, the disabled and the mentally ill, and includes children who fall into these categories. We need world leading palliative care to be provided for everyone. Care, not killing! This is the mark of compassion which means to accompany another person through their trials. It is not compassionate to kill another person, neither does it foster compassion in medical personnel. Rather it leads to a hardening of hearts and that is dangerous to everyone!	Other	Over 10 years	<p>The term 'assisted dying' is a smoke screen for the killing of human beings that most often are not dying. The majority of people who request euthanasia are those who are living with chronic pain or disability, or cannot face the end result of a terminal illness. Many of these people are depressed and feel hopeless and helpless, hence they should all have a psychiatric assessment. It is not a normal response for a person to wish to die unless they are psychologically compromised. The provision of good quality palliative and social care can solve a lot of these issues and can be life changing for people. But palliative and social care is more expensive than euthanasia! Hence, I cannot help but think that to bring in laws to legalise euthanasia is a cost cutting exercise that will become the expected norm with the result that palliative care is phased out or under funded. This is a very real scenario that will affect all of us and take away any choice or any trust in the medical profession. I want care, not killing!</p>
Disagree	I believe that assisted suicide is unethical.	Not Answered		
Disagree	Thou shall not kill	Not Answered		<p>Living with pain and suffering is very difficult. Life is sacred and precious.</p> <p>Over the years I have been involved / visited with many, many people who have been diagnosed terminally ill and subsequently died. My own brother quite recently passed away in this manner. Although the illness is not what I would have wished for him, the care and every assistance that was given to him was beyond my comprehension. The extended time he was granted was a very precious time, but he succumbed eventually in hospice where he was very aware of the love and caring he received until his final breath.</p> <p>Thank you for the understanding of Doctors and all nursing and medical attendants.</p>

	Disagree	I am TOTALLY against this and looking through I cannot answer any of these questions as they are incredibly biased and do not allow me to express my feelings towards this bill.	Not Answered		<p>Again, I am TOTALLY against this and as a young person and teen living on the island this scares me incredibly and I am horrified to think that I and my future children may have to live in a world where this okay and allowed. Life is given so little value - who can possibly decide whether another person's life is worth living or not, no matter how educated? In other countries where this bill has been passed, there has been a slippery slope of safeguards being eroded and in places like canada, assisted dying is a norm. So where does it stop? Mental health issues? Eating disorders? Homelessness? All of which are now classed as valid reasons for being able to access assisted dying in places such as: Canada, Australia, the Netherlands, Belgium, New Zealand. I want to reiterate how awful this bill is and how horrified I am that the manx government are even considering this. It is folks like me who will have to deal with the consequences of this bill as in 20 maybe 30 years it is the young people who will have to deal with this. The government need to know, in fact they must know that this bill is going to be irreversible; there's no going back. Please is my final word. Please to whoever has written this, stop poisoning these 'consultations' with utter bias and please stop twisting my words to 'fit' into your bill. Please Manx Government, hear my voice, value my decision. Please.</p>
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	Disagree		Not Answered	<p>I feel unable to provide an answer for most of the above questions as they make an assumption that I am in principle willing for there to be a bill drafted to assist people to die albeit with certain provisos. I am emphatically against such a bill as it will inevitably be open to all sorts of abuse and not serve well many groups of people who for any no of reasons may feel very low at some points in their lives, feel they cannot cope any more and be open to making a drastic decision that given some appropriate help they very possibly wouldn't. It would appear that a no of countries now offer an easy 'exit' strategy for people covering various scenarios which sounds very much to be giving the medics and other health professionals a way out of the costly alternatives of walking the walk with their troubled patients towards their healing or a 'good end'. We value the care we are given by the above professionals beyond words and cannot ask them to be party to the unthinkable. As it happens several of my family members have been recipients of therapeutic care and I cannot bear to think of them being offered such a drastic option at moments when they were at their least rational and balanced.</p> <p>I have to flag up that in giving you answers to the questions I have chosen to in this document and the ones I haven't I am indicating very forcefully that I do not perceive this document to be a consultation at all. It makes massive assumptions that I am basically in agreement with the efficacy of the private members bill being put forward but merely making a judgement on how it should be progressed. I absolutely am not. Please think more carefully of the far reaching consequences of putting such a bill in place.</p>
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Disagree	<p>Changing the law will inevitably affect how vulnerable people view their own worth and how they are viewed by others. People with a terminal illness will feel under pressure to end their lives, duty bound to not become a burden to society or family. End of life care is costly, however legalising euthanasia and assisted suicide will adversely effect investment in such care and will send a strong message that assisted suicide is a care option in itself, which it isn't. Cancer patients and people with serious illness are already under huge pressure from the health issues themselves, existing emotional and mental strain make clear headed decision making difficult, introducing assisted suicide will increase the complexities of the burdens they already carry.</p> <p>The UK is a world leader in palliative care, accessing such care is essential to relieve suffering, introducing assisted suicide as a quicker option will send strong messages to cancer and dementia patients that they are not cost effective and not wanted.</p> <p>There is abundant evidence from other countries of the inevitable abuse of the assisted suicide and euthanasia programs, should this be adopted in any part of the UK then we also will find ourselves in a similar situation to other countries who are increasingly using it in ways far removed from the original mandate. Cases in Canada and Belgium illustrate the point, at what point do we question the value of a persons life should they fail to live up to given criteria of wellness or functionality? Eligibility criteria expansion over time is inevitable and invariably death rates rise annually as the new 'normal' becomes assimilated into social perceptions. Canada includes in its criteria mental illness, depression, anxiety, and at least one case of a person entertaining assisted suicide due to inability to work due to chronic back pain leading to homelessness.</p>	Not Answered	
Disagree	I believe that death should remain a natural event	Not Answered	It is a very dangerous move and I hope the Bill never gets accepted as law. It will create a monster and The Island does not have the infrastructure to avoid that.
Disagree		Not Answered	I disagree with the proposal. I have left the majority of questions unanswered as they are skewed towards the decision being made that assisted dying is a foregone conclusion. I will not answer them as they are misleading. By me not answering them. it must NOT be assumed that they are a NOT SURE response, They must be read as confirmation that I do not agree with the bill,
Disagree		Not Answered	
Disagree		For over 5 years	I feel vounarble people may feel pushed in to doing this as not to be a burden.
Disagree	I do not agree with Assisted dying. It is not a kind treatment to human beings. Human beings do not deserve assisted suicide after having worked so hard during their working life.	Not Answered	The survey is biased towards assisted dying. There should have been more questions to support those that are against assisted dying. I am against assisted dying.

Agree	Although I cannot imagine the pain and difficulties that would lead me to want to end my life that doesn't mean that I would not want the option or to deny anyone else that option.	Not Answered	<p>I am slightly concerned about someone acquiring the medication on behalf of someone else and using it unlawfully.</p> <p>I am unsure what benefit there would be of having a medical professional on hand during the process.</p> <p>With respect to signing a declaration I am not sure how practical this may be in all circumstances but in general support that policy.</p> <p>I am not sure what live expectancy limit should be in place. If someone is in great distress that cannot be treated in any other way, what difference should life expectancy make in the decision. My intuition is no difference.</p> <p>If oral medication cannot be taken then would there be any alternative to a medical professional administering it? An automated system perhaps, activated by the patients signal?</p>
Disagree	I do not believe that we should play God with peoples lives. I think that this sort of legislation could be a slippery slope to the law being abused and the most vulnerable in society suffering as a consequence .	Not Answered	<p>I do not agree with this bill and believe that the questions, if I had answered them, would provide misleading data. Therefore I have not answered the questions and I want it to be understood that this does not mean I am unsure of the answer, it means I DO NOT AGREE.</p> <p>I am very surprised to see that there is not a independent body conducting this consultation. Had this been the case, maybe the consultation would not have been so biased in promoting assisted dying and the perceived benefits. I find the whole thing one sided and misleading.</p>
Disagree	In jurisdictions that have allowed assisted dying there has been significant mission creep, moving away from the original legislation. Vulnerable individuals need protection and I am concerned the proposed Bill does not do this effectively. Speaking to health care professionals there is real concern, particularly those working in palliative and end of life care. I believe that the Assisted Dying Bill is not required but adequate resources should be available to ensure that individuals are cared for effectively as they approach the end of their lives with dignity.	Not Answered	<p>The process of consultation I believe is flawed. The consultation document has many questions are deliberately misleading, generating data that does not truly represent the thoughts and feelings of someone opposed to the Assisted Dying Bill.</p>
Disagree	I believe all life is precious and has value. I think the island should invest more in its health care rather than allow people to be killed because its more convenient. I don't want the home I love to become known as a place to come and die!	Not Answered	<p>This questionnaire is completly biased and is assuming the bill will go ahead!</p>
Disagree		For over 5 years	

Disagree	<p>The law already allows palliative care doctors to support people who are dying to die comfortably.</p> <p>Proposed law changes are about allowing others to kill those of us who are not dying yet.</p> <p>Nobody should be getting left to suffer, it happens because of other failures that cannot be fixed by focussing on assisted suicide.</p> <p>What we really need is excellent palliative care and other support, including social care.</p> <p>Most people answering this just want someday peace of mind for conditions they imagine. For others of us this will be a reality.</p> <p>Please fix the broken healthcare system first!!! No safeguard can make that help be in place. This is a deadly distraction</p>	Other	You're not allowing options to disagree!!!!	<p>This is a terrible consultation. Nearly all of the questions you have asked assume we all agree with provision of suicide. How Disgraceful that your only consideration is how to end our lives. You're just abandoning people who mostly don't have access to the help they need. We're entitled to suicide prevention too!!!!</p> <p>It's not even about choice- people don't choose to feel suicidaor choose to suffer. Believing that this is somehow different for people with degenerative conditions is a deadly form of prejudice.</p> <p>Fix thebroken system instead.. first! This won't fix it</p>
Agree	<p>I agree that assisted dying should be available on the Isle of Man because it is the aim of all healthcare providers to do whatever they can to ensure people are free from pain and suffering, this should include giving people the option to be freed from their pain through assisted dying. All humans should have the right to be free from long-term suffering even if this means shortening their life. Quality of life is more important than length of life, particularly in terminally ill people. This is why those in end-of-life care are given access to 'harmful' things like alcohol and cigarettes because if they are going to die soon anyway why not die slightly sooner in peace and happiness?</p> <p>Although I believe religion and law should be separated to an extent, it is important to note that the main reason I agree with assisted dying is my faith. I am a practicing Christian and my life revolves around my faith, I believe in following scripture wherever it may apply to the world and as such I believe that we are given the knowledge of new medical abilities such as euthanasia in order to achieve God's wish to relieve us of our suffering. Jesus walked with us on this earth and saw the reality of human suffering so that God might know better how to relieve it, it is my strong belief that allowing people to end their suffering is true compassion and is part of Gods plan to improve our lives. An integral part of being a Christian is doing ALL that we can to help others, even if it means being upset ourselves, we must not withhold the relief of a peaceful death from those ready to meet the Lord in heaven in order to avoid our pain in losing them! Even for those who interpret scripture differently, it is obvious one of the most important lessons in the new testament is that it is not up to us to control other peoples lives, we may think we know better but we do not!</p>	Other	I do not believe they should have to be permanent residents.	<p>Assisted dying should be carefully considered in case of outside influence but provided someone has full mental capacity, is not under the influence of others, and still wishes to proceed after the waiting period they should be able to have it. It is important that people can give permission for assisted dying in advance, for example if they develop a disorder affecting capacity following a brain injury or develop dementia they will be able to access assisted dying despite no longer having capacity. This would hopefully reduce peoples fears of becoming seriously ill and not being able to communicate their wish for euthanasia. I believe that a session with a qualified mental health professional should be required for every person wishing to access assisted dying, this should ensure that only people who are under no other influence access it and will support people through the very hard decision and help them grieve themselves. I hope for the sake of all people suffering from terminal or chronic illness that this bill comes to pass.</p>

Agree	In order to provide an additional option to palliative care that prevents potential pain and suffering to the terminally ill person and their loved ones and that also provides a sense of control and preserves the dignity of the terminally ill person regarding the end of their life.	Other	No minimum time limit should be stipulated but legislation should include that proof of residence of Isle of Man may be required	Death certificate should state the cause of death as the terminal condition and not include the fact that the death was assisted. However, details of all assisted deaths should be returned to an examining body within a short period following the date of death for the purposes of scrutiny, oversight and producing (anonymised) reports.
Disagree	<p>i gather that the proposal is that the1981 law on Assisted Suicide be reversed, with which I disagree.</p> <p>No Public Sector Employee should ever be expected to take a Life or assist in the ending of a Life, on behalf of The State, or with the protection of The State - Law is too clumsy to legislate on these delicate areas, it is 'A Blunt Instrument'.</p> <p>I disagree with this utterly & entirely, but if you do get it through - it should not be 'Medicalised' - Doctors & nurses should not ever be involved in Terminating a life, this will fundamentally affect the Doctor/Patient relationship. As a Health Visitor I was sent on a 'Suicide Prevention Course' by the NHS, how can they send you on courses like that on one hand, & train staff to Assist in Suicide with the other?</p> <p>I am convinced that this will be the Slippery Slope - there is much evidence to back it up in the Media, If Dr Allinson cares to look.</p> <p>MHKs know nothing of the issues unless Medically trained, I have been present at many deaths in Hospital, Hospice, & Care sector, & I can't think of any that were traumatic to any concerned, except for the experience of loss itself. An unavoidable part of Life.</p>	Not Answered		<p>Q 11 IV administration would amount to Euthanasia (are you trying to sneak that into Legislation?).</p> <p>Q 25 Death Certification sometimes takes hours even the next day, but the idea that anybody involved with supplying a lethal poison, & not staying with the patient is unthinkable. The person might experience many different scenarios, such as vomiting, severe allergic reaction, have a seizure, or change their mind? To name but a few.</p> <p>I have already said that I don't think Doctors should be expected to Assist in terminating Life.</p> <p>I have no confidence that any 'Good Practise' would be carried out following Legislation based on this Consultation, because the Consultation is Biased & has been rushed through over the Christmas period. Dr Allinson is going to sort through the Questionnaires himself. How is that Accountable? The last time that MHKs did any serious investigation of this subject was in 2004 when there was a Select Committee - Why not now? Much has changed in 18 years.</p>
Disagree		Not Answered		

Disagree	<p>I have many reasons for objecting to this legislation but I will list a few of my main concerns. While it may seem to many people the compassionate thing to allow such a process, any change in the law in this area would be a grave mistake and could open the door to a multitude of problems.</p> <p>According to the Royal College of Physicians assisted dying survey 2019 Only 5% of palliative medicine Doctors expressed support for assisted dying. Why such a minority? Surely a much larger percentage of those specializing in this area of care would support such a scheme if it really was in the patients best interests.</p> <p>Looking at the experience of other countries, bringing in such legislation appears to be the start of a slippery slope and any safeguards brought in now could in time be relaxed as in countries such as Canada and The Netherlands and states such as Oregon. What assurance can be given that this would not be the case here?</p> <p>Reports show that in Oregon 54% of people who chose to end their life through assisted dying gave being a burden on family as a key reason for their decision. (Source: Oregon Death With Dignity Act 2021 Data Summary, p13) On 5th September 2015 the Guardian reported that 500,000 elderly people were abused each year in UK, mostly by their families and often for financial reasons. This number could well have increased in the years since and particularly now in light of the current financial problems many people are facing. I believe that introducing this legislation would put unnecessary pressure on valuable older or weaker members of our community, and could well put many lives at risk including some who may have risked that life for the good and safety of the Island</p>	Not Answered	
Disagree	<p>I am against Assisted Dying as it is similar to Assisted suicide and should not be available as a form of killing people which is morally wrong. The Government should give more support and funding to our excellent Hospice who provide palliative care for the dying. Any change in the law would be dangerous for the most vulnerable in society who might be made to feel they are a burden to the Health Service or to their Family. We are a caring society and should be able to care for those who are terminally ill without offering an option to take their own lives.</p>	Not Answered	<p>This questionnaire is biased and should not have been written by an organization who support assisted suicide. That is why I have refused to answer some of the questions. I am against any change in the law. It is unethical, it is unnecessary, it is dangerous for vulnerable people and would become uncontrollable as is evident in other Countries. Financial resources would be better spent on helping people to live well and if necessary receive the wonderful support, assistance and palliative care freely available at our Hospice.</p>
Disagree		Not Answered	<p>I have personal experience of the palliative care provided by Hospice on the Isle of Man to an immediate family member of mine. I can say from personal experience that the care provided by hospice is highly effective and provides the relief and comfort that individuals need without playing God. I believe that assisted dying / assisted suicide is unethical and unnecessary. I also believe that the regulations surrounding how these qualifying parameters are decided are risky and are open to abuse. On top of that I believe that giving the members of the general public access to life-ending medication is terrifying and irresponsible.</p>

Disagree	I believe all life is a gift. Bringing this bill in completely undermines this belief. My concern is especially for those who are vulnerable for feeling burdensome on family and friends or going through periods of depression. This could be the beginning of a slippery slope to similar criteria as Canada now use which includes mental and physical disabilities.	Not Answered	To reiterate my earlier concern, I believe the vulnerable are at risk of feeling coerced into go for the assisted dying option. This procedure should not be referred to as 'assisted dying' but should be called what it is... suicide. I understand the arguments for this bill but cannot agree with them, many people who have been fortunate enough to survive trying to take their own life have been grateful for their second chance and often end up sharing their stories with others to persuade those who are at risk that there is a better option and better way! That taking your own life is never the 'best option' or the 'right choice'.
Disagree		Not Answered	
Disagree		Not Answered	Total disagree with this bill. So unethical. Example doctors conscience rights and the doctor -patient relationship
Disagree	I am quite convinced that relational pressure, primarily from family members, would result in some individuals reluctantly choosing the end their life. Even if this was only the case for one or two, this would be a tragedy. Also, I believe that the process of administering assisted dying would be detrimental to each of the parties involved.	Not Answered	
Agree	I feel strongly that, given the correct criteria, people should have a 'good' death - one without pain or unnecessary suffering.	Not Answered	The right for a person to choose, once certain criteria, has been met is critical to me so the individual dies without unnecessary suffering or pain.
Disagree	I do not agree with the introduction of assisted dying being introduced on the Isle of Man. It would permanently damage the relationship the Medical Practioners in general and the Doctor is particular has with the Patient. In other Countries, that has introduced such legislation, there has been a move to extend the criteria. Shocking fact are available for those that are prepared to investigate the matter. Dr Allianson makes emphasis on 'Safeguards' We should be reminded of the interview conducted by Tim Glover, whilst at Manx Radio. Mr Glover put to Dr Allianson after his disastrous Media Report to Tynwald that Dr Allianson chaired.....Are you, Dr Allianson, seen with great promise, naive? I am not answering any further qustios as they are not relevant.	Not Answered	
Disagree		Not Answered	I do not agree with this bill as only God decides when we die.

Disagree	<p>I am instructed by my Committee to vehemently oppose this proposed legislation.</p> <p>Our overriding aim as a charity is to support and protect the welfare and wellbeing of those diagnosed with autism in the Isle of Man. These individuals are among the most vulnerable members of our society, some are non verbal, and many have learning difficulties which do not allow them to make rational decisions. We believe that any 'safeguards' outlined in the consultation document are both vague and (in places) contradictory.</p> <p>We believe that the medical profession should be concerned with the preservation of life and not the deliberate taking of life. In short, our opinion is that we do not consider advocating assisted suicide/dying to be in any way compatible with the role of ANY medical practitioner.</p> <p>We would like to draw your attention to this case study from the Netherlands (which is logged in the official health records of the Dutch government.)</p> <p>https://www.dyingwell.co.uk/blog-is-it-possible-to-make-assisted-dying-laws-safe-for-people-with-intellectual-disabilities-or-autism/</p> <p>In this case, the Dutch Euthanasia Review Committee considered that an autistic individual in her 70s recently recovered from cancer surgery (but unable to cope with the fact that she could no longer eat in the fashion that she had done prior to surgery) should be allowed to end her life, concluding that, due to her autism, she was enduring “intolerable suffering without</p>	Not Answered		<p>We consider that this consultation document/questionnaire and its wording and options for response, for the most part, assumes that the legislation will be enacted. For each question, there should have been a fourth option, whereby those opposed to assisted suicide/dying in any form could re-affirm that opposition.</p> <p>Raised within the consultation document, is the possibility of our Island allowing people to come here from elsewhere in order to end their lives prematurely via assisted suicide/dying. Would we not then be in danger of becoming a cut price Dignitas? Equally, is it acceptable that our Island could profit financially from what Jersey has described as 'suicide tourism'?</p>
Disagree	Total disagree	Not Answered		
Disagree	<p>*It could send a message to those in a vulnerable state of mental illness that "assisted Dying" (legal suicide) could be the easy option to their problems rather than pursuing treatment.</p> <p>*There could be a risk of coercion to the person concerned, or that person feeling that he or she is a burden to the family.</p> <p>*If people are told there is no cure for their illness, then research may suffer as there will be no need for them.</p> <p>*Similarly, palliative care funding could suffer if assisted dying is seen to be a more cost effective solution.</p>	Other	2 to 3 years	<p>The nature of the questions come across to me as if the bill passing is a forgone conclusion, but do we agree with it?</p> <p>IE: The questions all relate to assisted dying/suicide without mentioning what other alternatives are available such as palliative care.</p>

Disagree	<p>This survey is bias in its phrasing.</p> <p>The safeguarding measures will not protect our vulnerable. Having worked and met people who feel a burden on society, I have asked why and they explained they felt pressured by family, doctors and the like and felt irrelevant.</p> <p>Safeguarding measures have not worked in other jurisdictions and the pressure of government and society to undervalue our elderly and infirm leads to people feeling they are better out of the way. We should be changing societies views and seeing the value, not aiming to let them disappear. We have medical ways to help those who are in pain, so should use that rather than finding ways to kill people.</p> <p>Question 9 is poorly written - it does not give an option for those who do not agree with the bill apart from “not sure” which is actually an option that makes one out to be uninformed or indecisive. My option would be no - all people are valuable and should not have an expectancy placed on them by others (or even themselves).</p>	Not Answered	<p>Why are these questions all assuming agreement that assisted dying is implicitly agreed to? Where are the options for “no - nobody should access assisted dying” and “no - permanent residents or visitors should not be offered assisted dying”?</p> <p>This is a terribly written survey. Very biased!</p>	<p>Again, what a biased survey. No medical professional should be expected to carry out assisted help if they have a belief or value system that makes them feel compromised. No medical professional should be expected to recommend others to assist (as this still goes against their value/belief system). No pharmacist should be expected to distribute medications that could kill if it is against that value/belief system. Palliative care and other options should be the prime answer - mental health is low enough on the Isle of Man without letting people think we don’t value life and that two professionals believe they don’t deserve /need assistance. The current financial and environmental climates will also exacerbate this because some may feel they are not worth the ‘resources’ from the state - money and sustainability. They may take on the responsibilities and blaming their presence on Earth, rather than the government taking on their responsibility to fund/support their people and minimise our impact on the environment. It is easier to reduce population than do their role - shameful! Families under pressure financially will put subtle pressures on the older generations and disabled, because our society is not willing to support them - shameful.</p>
Disagree	<p>In every country in which it has been legalised, two things have followed.</p> <p>1) An apparently inevitable creep in scope away from people who are straightforwardly terminally ill and close to death, to encompass a truly and terrifyingly enormous range of people with a wide range of conditions including those who are by no definition terminally ill but merely living with a long-term disability.</p> <p>2) The abuse of the option by those for whom it is convenient. Canadians told that care and housing adaptations cannot be funded but assisted dying will be. Dutch folk who have survived abuse and are living with long-term mental health challenges being ushered towards death rather than therapeutic support. And on and on.</p> <p>These two effectively lead to a third: there will be coerced deaths, which should rightly be called murder. People pressured into asking for it when it's not really what they want. People who are left, wrongly, feeling like it's their only option. People "helped" to ask for it by someone who does not have their best interests at heart.</p>	For over 5 years	<p>I actually don't think it should be available to anyone at all but the idea of the Isle of Man becoming a 'death tourism' destination is horrifying.</p>	<p>If this Bill goes through it will achieve exactly zero additional peaceful deaths, because these can already be acheived by good, basic palliative care. What it will result in instead is the clamouring of those ON BEHALF OF people with severe disabilities to extend the killing to us, too. And then we'll start to die.</p> <p>Please, please don't do it.</p>

Disagree	<p>Terminally ill adults are receiving good care here and they are kept comfortable.</p> <p>Assisted Suicide in other words is wrong.</p> <p>I am hoping people of Isle of Man will request "Assisted Living" rather than Assisted Dying.</p> <p>"Voluntary Assisted Dying" is ill thought proposal with loads not taken into account!</p> <p>It is not the same as Euthanasia - so we are clear.</p> <p>Voluntary Assisted Dying is when a person chooses and quits life by himself with pills, etc without any medical supervision/assistance. It is inhuman</p>	Not Answered	<p>Assisted dying legislation erodes the idea that all lives are valuable!</p> <p>And the issue of the DRUGS that this person administered to him/herself being totally alone - and what if they change their mind? who will save them?</p> <p>Do you know that here is no reliable way of producing a peaceful and painless death either orally or via IV when the body is not biologically ready to die</p> <p>There is little or no research and no agreed worldwide agreed protocols</p> <p>Death can be prolonged with multiple side effects...30 hours or more with varying levels of consciousness</p> <p>Huge doses required means huge numbers of tablets. EG..Hawaii and Colorado formulation for Assisted Dying is 385 tablets. All to be taken within 5 minutes and kept down.</p> <p>Nausea, vomiting seizures and regaining consciousness are common side effects.</p> <p>We need to focus on improving the Health Service and Usual Living Conditions</p>
Disagree		Not Answered	
Disagree	<p>Life (IOM) believes that if such a law if passed even with the so called safeguards would be a detriment to our Island community. As shown in other jurisdictions where such a law has been passed it has very quickly opened up the way for abuses and is open in some places to minors. It has meant that the elderly, the disabled, and the vulnerable feel or have been under pressure to end their life in this way. The IOM Government should be seeking to help with people's mental health and providing more resources rather than just offering this way out of life.</p> <p>There is very good palliative care on this Island through the Hospice and Hospice at home. This could have even better funding from Government.</p> <p>And who would carry this out? I understand that our doctors at Nobles are against such a law and the slippery slope that comes with it.</p>	Not Answered	<p>I totally disagree this Bill that assisted dying should be permitted for terminally ill adults on the Isle of Man.</p> <p>There is actually no capacity law on the Island as yet and that will take a while to implement and training given to carry it out.</p> <p>Life is totally against such a Bill and regard it as a complete waste of Government time in producing it when there is so much else to do on the Island including supporting in a positive way our Health Service rather than this negative approach.</p>

Disagree	<p>The stance of Living Hope church remains that life is God given and the sanctity of life is of paramount importance. ALL human life is of equal value and to agree to “assisted dying” would infer that some people’s lives are worth “less” than others. This is an extremely dangerous position. The phrase “assisted dying” results in the same outcome as “assisted suicide” or “voluntary euthanasia” and describing them as different approaches is both dangerous & misleading.</p> <p>No assisted suicide law can ever be a safe law. There is compelling evidence in other countries where “assisted dying” has already been introduced (eg Canada, Belgium, Netherlands) to indicate that initial so called “safeguards”, designed to ensure that the “assisted dying” process is subject to “stringent” regulation & guidelines, have subsequently been “watered down” and now extend to include vulnerable individuals who are physically disabled, mentally ill, psychologically unstable, or “elderly”! This is abhorrent! Those considered vulnerable in our society should feel secure and protected. Society and our laws have always resisted “assisted suicide” because of the dangers to vulnerable people.</p> <p>Effectively, introducing “assisted dying/suicide” would be like reintroducing the “death penalty” by the back door. However the only “crime” an individual would be “found guilty” of is being ill, infirm, or disabled. One of the reasons the death penalty was withdrawn in our so called civilised society was that, once enacted, it can never be undone and the potential for a miscarriage of justice, however small or unlikely that may appear, is there.</p> <p>Similarly, misdiagnosis of a “critical condition”, leading to assisted suicide</p>	Not Answered	<p>ASSISTED DYING CONSULTATION - BIAS REPORT.</p> <p>It is extremely disappointing that the consultation questions are loaded and assume the respondent is in agreement with the principal of “assisted dying/suicide” - why is this?</p> <p>It would appear that the intention is to “lead” the respondent down a particular path so as to be seen to be in “support” of the proposal.</p> <p>WE DO NOT SUPPORT THE PRINCIPLE OF “ASSISTED DYING/SUICIDE” IN ANY SHAPE OR FORM.</p> <p>We believe that the public consultation that is being managed and coordinated by the Cabinet Office, Isle of Man Government, on Assisted Dying does not meet the standard of design required for a government consultation. In summary, bias is particularly present in the design of questions 9, 11, 12, 13, 14, 15, 19, 20, 21, 22, 23, 24, and 25. To a lesser extent, there is also some evidence of some bias towards an acceptance of the principle of assisted dying underpinning in questions 16, 17, and even to some extent in questions 18, 26 and 27. The only questions that do not display bias in this way are the demographic questions (1-7) and questions 8, 10 and 28. As a result, excluding the demographic questions (1-7) there is evidence of bias in the question design of 28-10=18 questions, representing 64% of the non-demographic questions. This level of design bias would not even be acceptable in a student project, never mind a civil service authorized public consultation.</p>
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Disagree	<p>I am against this proposal which I see as being harmful to Isle of Man society.</p> <p>I have many reasons to support these concerns. A few include:</p> <ol style="list-style-type: none">1. any new legislation will conflict with the prevention of suicides. Suicide is already increasing, especially among young people.2.life expectancy cannot be reasonably estimated. There are many examples of people being given 6 months to live, who then live much longer. Therefore in Q9 below it is impossible to be accurate.3. Every country, where such legislation has been put in place, has seen challenges to the initial legislation to increase the scope of groups that can be included within its 'assisted dying' legislation. E.g. Canada now sees those with mental health problems, teenagers, those in poverty and those with disabilities now being encouraged by health services to consider committing suicide.4. Countries with this legislation have seen an increase in suicides over the period of time.5. Doctor / patient relationships will inevitably deteriorate as doctors will no longer be working to exclusively save lives but will be required to consider whether suicide should be an option.6. The proposals will inevitably have an effect on our world leading palliative care system (e.g. IOM Hospice). Surely the Government would be better helping those get proper access to hospices rather than the ruthless efficiency of prematurely ending the lives of the weak and vulnerable.7. Once these laws are passed and expanded (see 3 above), we see that 'being a burden on the family' is now being given in other jurisdictions as a reason for taking up assisted suicide. This is what happens when	Other	10 years	<p>I note that this consultation is extremely biased. I have therefore not answered several questions as to do so could be wrongly interpreted as me giving support for these unhelpful proposals.</p> <p>Other reasons why I am against are:</p> <ol style="list-style-type: none">1. There is no need to change the existing laws because, in the exceptionally few cases (currently) where someone might want to commit suicide, a prosecution is at the discretion of the authorities.2. civilized societies have been run on the premise that to kill is wrong. What message would the IOM Government send by enacting laws legalising the killing of its citizens.3. Is the IOM being targeted by pressure groups whose main motivation is to put pressure on the UK Government?4. I understand most medical and health care professionals are against these proposals.5. Some questions relate to having medicines that are lethal being available for circulation in the community. This is clearly a very dangerous thing to allow and I would be strongly against it.6. Given the current problems in the health care service, would the resources even be available to carry out the proposals.7. Hospice should be encouraged and supported better that it currently is by Government. <p>All in all, I find these proposals a very sad indication of the way society is heading and thus want to stand against them.</p>
Disagree	Allowed to die naturally.		Not Answered	
Agree	In very limited circumstances		Not Answered	
Disagree			Not Answered	<p>Found this to be a very biased questionnaire with those opposed to assisted dying having many questions that had to be left unanswered!</p>

Disagree	<p>I an a Christian, 70 yrs old, disabled for 30 of them. I speak from my own experience with consultants and am still under one part of health care on the Island.</p> <p>I have been on two pain management courses off Island, at Walton and at Bath.</p> <p>I have met a few caring professional doctors.</p> <p>There is not one of them I would trust to agree with me that my life could not be made better and I could therefore die.</p> <p>At Walton we were told to stop rubbing or paying attention to our pain as this was a habit. A lady with hand splints to help cope with bones that had begun turning the wrong way, to take them off..this was a habit as well as using her stick..which was hard enough for her to use but helped her cope with her knees becoming like her hands.</p> <p>When a nurse from the Island who had damaged her back in an accident at Nobles asked, in a lesson on how to be positive and forthright in our lives, how to speak with the doctors and consultants that we were patients of, as we all had the same feeling of being overwhelmed and nervous and had been treated with lack of care..talked down to and told that 'it' was all in our head. The answer was he was NOT there to answer questions like THAT. She was MORTIFIED...we all were..at the callous way he had treated this lady..who had been a nurse, was a wife and mother and, like us all was trying to help herself cope..that was why we were THERE.</p> <p>One lad was in such awful pain because his fiance had forgotten to pack his meds in his bag when he had caught the train from Manchester. The consultant who saw Dave was in pain, told him that he couldn't be provided with meds..he had to leave..in great pain.</p> <p>Hopefully pain management will become even better. AI is helping with this</p>	Not Answered		<p>There are vulnerable people in the world. We are all precious and only God can know our true worth and problems and He HELPS ALL who ask in Jesus' name ..I know.</p> <p>Please help us to live till we die.</p>
Disagree	<p>Strongly disagree.</p>	Not Answered		<p>I strongly disagree with the proposed introduction</p>

Disagree	<p>I understand why this keeps coming up as an issue, but given the apparent continued failings of health and social care on the island (witnessed by multiple, recurrent high profile sackings, scandals, payouts, NDAs, etc) iMHO the focus needs to be on providing and ensuring safe and effective care of the living, and improving access and availability of comprehensive palliative care to the dying, before taking this huge step.</p> <p>Although I stated I can see why it comes up as an issue, I am forever perplexed that the principles of any suggested always state that the person must self-administer the life-ending medication. ATEOTD there is absolutely nothing stopping anyone doing that right now, and it could be infinitely easier for them to do so. IMHO this wanting for it to be medicalised is evidence of their pushing away the accountability and psychological burden onto practitioners who may fundamentally want no part in it, but may be pushed into doing so anyway. How can that ever be safe or dignified?</p>
Other	<p>Possibly longer than 5 years, but more as a deterrent against suicide tourism or migration that could overburden our already overstrained health services, let alone add considerably to the cost of them (without due previous input). If ordinary care access is 5years then this would have to be also otherwise there could be a large influx of unwell people or older relatives of new residents, etc.</p> <ol style="list-style-type: none">1. Is it true that non-residents of the IOM can respond to this survey? If so, WHY?2. Please focus on sorting out the mess that purports to be our health service. It would be impossible to provide a safe standard of care to the dying if they can't even get the day-to-day bread and butter type everyday care right.3. Noble's (and elsewhere) seem to be chronically understaffed. This would put additional pressure upon them and could be something that dissuades people from taking up jobs here.4. Pharmacists, you say? Surely this is something else that needs to be addressed as a priority, as Pharmacists/residents are definitely not getting an adequate or safe service for routine medications.5. Once again, self-administering of the drug seems to be the elephant in the room. No one is stopping that happening right now. What really changes in places where this has become law....except the barbaric treatment of the elderly/disabled/mentally ill and even children by exploitative relatives and unethical practioners? How to you legislate against that when even courts have supported the unwanted euthanasia of a lady with dementia. We always hear "no means no" regards sexual consent, and that a mind can be unmade, but that has failed to apply to someone with dementia who said no repeatedly but was forcibly given a drug to kill her. Extreme example? No sorry, you don't get to filter or dismiss a case as outrageously horrific as that. It's what you're up against and the elderly in particular are going to be seen as fair game but the unethical or greedy relatives with their eyes in houses and Wills.6. I once heard a doctor say that is euthanasia ever came it, the vast

Disagree	<p>I disagree with the proposal because I believe it will, in the foreseeable future, endanger the lives of the most vulnerable in our society.</p> <p>My mum is currently transitioning into a care home needing 24/7 support. With her deterioration, she often apologises and says she feels like a burden to the family (which we constantly remind her that she isn't).</p> <p>I appreciate the proposal currently sets a high bar for eligibility. Still, we don't have to look far to see how in the countries where assisted dying has been introduced, the law has expanded numerous times after implementation, and it has become a slippery slope with people mounting legal challenges to gain greater access. In Canada, the original safeguard requirements for a person's natural death to be "reasonably foreseeable" has now been completely relaxed! There is now mounting pressure for mental illness and children to have the right to access assisted suicide.</p> <p>This could mean vulnerable people, possibly under family coercion, concerns about care home costs, feelings of guilt, and not wanting to be a burden, could pursue assisted dying in the years ahead - making the choice for all the wrong reasons.</p> <p>This reality is 100% supported in a recent BBC article</p> <p>https://www.bbc.co.uk/news/world-us-canada-64004329</p> <p>"A number of reports suggesting that some Canadians have opted for assisted death, at least in part because they could not afford adequate</p>	Not Answered		
Agree	<p>To give another option to those who may have a sub-standard life, be in immense pain & suffering from which there is no possibility of recovering or eliminating the suffering. This may be a condition that the person is going to live with for many many years to come.</p> <p>Hospice IoM is wonderful but can't cater for all types of suffering and relief and Hospice IoM is not making itself available with at least 50% of beds not in use late 2022.</p>	Other	Over 2 years.	No thank you.
Disagree	<p>I am concerned that there may become pressure on people to be coerced into assisted dying to save their family or the NHS money on continuing care and it could be a slippery slope.</p>	Not Answered		<p>In practice in other places these laws start to include more conditions rather than simply terminally ill.</p> <p>It is unfair on doctors to be expected to carry out this work.</p> <p>I would rather see greater investment in really good palliative care and pain relief</p>

Disagree	<p>I use to like the idea of my death my choice. I wanted to die at my choice when faced with terminal illness with unbearable suffering.</p> <p>Through the course the past few years I have changed my mind due to growing concerns around the world.</p> <p>I do not agree with the proposal for the following reasons:</p> <p>"A person is deemed to be terminally ill if a registered medical practitioner has diagnosed them as having a progressive disease, which can reasonably be expected to cause their death".</p> <p>As a doctor, you can see the problem immediately.</p> <p>every disease is potentially capable of causing death. We are all born with a death sentence. Our life is terminal with a time limit.</p> <p>Many diseases are progressive. That is why we have continual research in our battle against diseases.</p> <p>No one can give a prognosis of certain months or weeks to live. We all get it wrong all the time. Speak to doctors who practice medicine amongst people with "terminal" diagnosis.</p> <p>The incidence of truly terminal illness with truly unbearable suffering with truly no hope is so rare you do not truly need a law change.</p> <p>The above quote from your introduction has so many unknowns and wishy washy, it cannot have the power to mobilise opinion on truly trusted outcome.</p> <p>It is best if you focus on supporting people living through difficult diseases</p>	For over 5 years	<p>The debate on assisted dying (AD) is not widened as you have suggested in the opening paragraphs. The debate has not been provided with any hard evidence from the current jurisdictions. I feel that proponents of AD have picked emotive arguments to support their claim along with statements with no foundations.</p> <p>"My death my choice" is always going to attract favourable opinion. Freedom to choose the timing of death, autonomy to take control of life is again attractive arguments. What is missing is the fact that the suffering is not unavoidable in most cases and there are many modes of support including pharmacological and non-pharmacological that can be provided to people in their difficult moments.</p> <p>As a doctor, as a fellow human, I expect to provide hope even in moments of difficulties.</p> <p>As the science develops, we ought to everything possible to minimise human suffering and live life until we die, naturally. There is no need really to offer the choice of death to anyone. Please shed the attraction of superficial choice and freedom arguments and understand and accept that there is real safeguards in assisted dying.</p> <p>Please stop this becoming law. Please withdraw the draft proposal.</p> <p>Please get down to governing people and help them in all possible ways. Please make truly difficult choices in the interests of large majority of people who have so many problems- help people with</p>
Disagree	<p>I am 80 years old and I think that bringing in this legislation is a slippery slope. As you get older you become more dependent on those around you, almost returning to your childhood, but without the promise of growing up. I am aware that this proposed bill is for those of sound mind with life limiting disabilities, but there are people out there who will twist things so that the legislation can be used for their own purposes and there are others who will be manipulated into asking for a termination of life as they are burden on their family!</p>	Not Answered	<p>I find this is a very biased consultation.</p>

Disagree	<p>Whilst I do not want anyone to suffer during their end of life experience, as the proposer of the bill says there has been and will continue to be great strides in palliative care, I am concerned about the unintended consequences on the vast majority of the population who will pass peaceably away as the body gradually closes down its vital organs and releases its own endorphins to deal with pain.</p> <p>Experience to date with other legal relaxations to terminate life such as in the unborn child, attention in time switches from the child to the convenience of the parents regardless of the health of the unborn child. No matter how many safeguards are built into the legislation once the platform is in place, relaxations of the criteria can be introduced until it becomes a matter of convenience to surviving relatives who see their inheritance dwindling away in nursing fees, hospitals running out of bed spaces and governments facing increasing costs in benefits etc. Convincing a person that they are a burden during their end of life experience will not be difficult and how much pressure can any of these groups in time be able to exert on a Doctor to have the conversation with their patient. I am quite sure this pressure won't happen in the next say decade as it took 60 years of gradual changes to the criteria before the abortion laws in New Zealand were changed so that a child who suffered a failed abortion can be left to die without life saving interventions.</p> <p>I am concerned that the use of the word 'choice', in time will effectively mean that choice will be handed over to others rather than the patient. This will mean that for a person who doesn't need an injection of a lethal drug to kill themselves they are psychologically injected with a fear that</p>	Not Answered	<p>As I disagree with the proposed legal changes as outlined on this submission I see no point in answering this eligibility section of the consultation.</p>	<p>At least one of the doctors should be their own GP, the other being a consultant with experience of treating people with life threatening diseases.</p> <p>In answering the points in this section they could be used to imply I am in favour of the proposed changes which I am certainly not for reasons given.</p>
Not Sure	<p>While I believe there should be dignity in dying I think there's also something to be said the dying process to be lived, for all concerned. For a terminal illness I think as a family member I would be left wondering What if..... , where with a natural death you know that their time was up.</p>	For over 1 year		<p>I think that doctors now unofficially enable people to die when the time is right without it having a name.</p> <p>I'm not sure how those left behind will process what has happened during the grieving period and therefore potentially need help themselves for a considerable time afterwards.</p>
Disagree	<p>I think that adequate hospice services should remove the need for anyone to feel they need assisted dying. With such support, some people could have a better end of life experience than they anticipate. Making assisted dying available implicitly suggests it will help people but I believe that appropriate end of life care should be able to help them more and a) this message should be better disseminated and b) adequate funding for end of life services should be available, rather than having assisted dying permitted.</p>	Not Answered		
Disagree	<p>The safeguards will never be enough. In other countries the experience is that once passed, the genie cannot be put back in the bottle. That once passed the criteria will be relaxed time and again so that people who are distressed through property and lack of services will be offered death instead of remedy. This is an ethical apocalypse.</p>	Not Answered		<p>This questionnaire is unfairly set out. Most of the questions assume assisted dying is already going ahead, and is only asking how it should be done, rather than if.</p>

Disagree	<p>Doctors can’t accurately predict time left. My mum was given 2 months to live with stage 4 ovarian cancer and lived another 6 years, a large portion of which was in remission.</p> <p>Inevitably the law will extend to those with disabilities and mental illnesses as we have seen the pattern in Other countries were a similar bill was introduced. The risks towards vulnerable individuals is huge and there are many scary stories of young people with depression being euthanized for example.</p> <p>We have excellent palliative care which should be increased and better resources. I have friends who work in the hospice and in community palliative care and they would say that no one need die in pain.</p> <p>Disability groups and palliative care medical staff are against this bill.</p>	Not Answered	<p>I have omitted several questions as they assume I answered yes to question 8, surely this is a flawed and weighted questionnaire from that perspective</p>
Agree		Other 6 months	<p>Make provision for the person to self administer IV drugs. Health professional to set up line etc, but patient pushes a button to start the pump.</p> <p>How will a bystander know that it’s an assisted death? Eg if a person decides to go and sit in their favourite spot on Douglas beach and take the drugs, will this trigger a full emergency response? Can it be a requirement that the person must have the paperwork with them? Otherwise could be a lot of wasted police time etc trying to work out what has happened.</p> <p>Do the drugs used present any hazard to anyone else in the room, or subsequent handling of the body?</p>
Not Answered	<p>Should this read as "In principle"?</p> <p>I understand that many terminally ill adults are worried about how they will die. But I also understand that that there are all sorts of pressures faced by these very vulnerable people, not least of which is the feeling of being a burden to loved ones. In short, I have concerns relating to the abuse of elderly people and those experiencing depression following diagnosis. I also have concerns about the slippage of safeguards (question 9 immediately raises that issue), about the lowering of the value placed on the lives of some people with disabilities and the potential impact of social media algorithms on individuals contemplating assisted dying. On balance, I am not broadly in favour of assisted dying legislation, but this position is not a matter of "principle".</p> <p>Given my views, many of the following questions appear to be "not applicable".</p>	Not Answered	<p>I have outlined some of my views in answer to Question 8.</p> <p>I am concerned that this consultation has asked so many questions that were simply not applicable for respondents holding similar views.</p> <p>I wonder how many people wished to offer their views but have felt unable to contribute to this consultation.</p>
Agree	<p>I think individuals should have the right to choose to end their life when they are terminally ill</p>	For over 5 years	<p>I found it difficult to answer some questions. on question 20 I think a waiting period of 14days is too long once the decision is made and authorized etc. I think 24hrs would be sufficient.</p>

Disagree	<p>1. Insufficiently clear definition</p> <p>'Terminal illness' is defined as 'a progressive disease, which can reasonably be expected to cause death.' We appreciate that it can be fiendishly difficult accurately to predict how long a patient with a terminal illness might 'reasonably be expected' to survive. In one sense, life itself could be described as a terminal illness – one in one of us dies eventually. But in another, less frivolous sense, equating a terminal illness with a progressive illness that can reasonably be expected to cause death, without any mention of a time limit, captures a whole range of progressive illnesses that may (or may not) eventually prove fatal but perhaps not for five or ten years, or even longer.</p> <p>Conditions such as muscular dystrophy, multiple sclerosis, progressive pulmonary fibrosis, cystic fibrosis, chronic obstructive pulmonary disease, chronic heart failure, dementia etc, are all captured by this definition. In many cases, when well-managed, they are compatible with life over many years. High quality palliative care can control symptoms in almost all cases. The 'intolerable' can become tolerable.</p> <p>We suggest these (and other) ultimately fatal diseases do not fall within the scope of the term 'terminal illnesses' as commonly understood. As presently worded, the proposals would make assistance to die available to people who will not imminently die of their illness but who choose to end their lives for other reasons, even to those with existential angst or simple weariness with life.</p> <p>While we fundamentally oppose such a Bill in its entirety, if it were to go forward, we would strongly suggest that the phrase 'within six months' be added to the definition of terminal illness so that it reads 'a progressive</p>	For over 5 years		<p>See comments in response to Q8</p> <p>Data collection and audit should include details of how eligibility was agreed - was a mental health specialist opinion sought, were family members consulted, was there a history of pre-existing mental health vulnerability, etc? Data should be audited annually, and made available for research purposes and to guide policy development. We strongly suggest there should be an independent annual review of the functioning of any legislation that does come into effect.</p> <p>We agree that assisted dying should be limited to those who are resident in the Isle of Man for a minimum period of five years and urge the House of Keys to resist any pressure to open their doors to those seeking assisted dying from other parts of the UK, or beyond.</p>
Agree		For over 5 years	<p>I think if under 5 years people should have to pay - similar to not qualifying for benefits etc. until 5 years residence</p>	<p>In presence of healthcare professionals I support this entirely where the person has a chronic, life-limiting, or terminal illness which detrimentally affects their quality of life.</p> <p>I also support that a person can opt whilst still compus mentus to have assistance dying in circumstances that they wish, so that their appointed attorneys / guardians can effect that decision for them should they lose the capacity to make the decision themselves.</p> <p>I don't believe the Island should 'promote' assisted dying for it to become a tourist attraction to the Island.</p>
Agree	<p>I agree in expectation that there will be stringent safeguards in place to protect the vulnerable.</p>	Other	<p>I believe 10 years would be a more permanent provision</p>	<p>I'm not too sure whether some of my answers have been contradictory. The choice of the two doctors would be an example of this as it may be that only doctors who agree to the principle of assited dying may be the only ones who would be prepared to put themselves forward. It is also important in my opinion that the ability to change one's mind should be in the thinking of the person or persons assisting in the decision.</p>

Disagree	<p>I am opposed to the bringing in of euthanasia and mercy killing. I have friends in the Isle of Man who are very concerned by this proposal. I serve a church whose members are utterly opposed to such a move. If it is introduced in the Isle of Man, there will be a pressure for it to be made law in the rest of the UK.</p> <p>Such legislation would do great harm. With its introduction, those who are unwell would feel an increasing and irresistible pressure, as they deteriorate and need nursing, to no longer burden their families and others. Without this legislation, such thoughts may well not cross their minds. It is known that some folks who have wanted to end their lives once diagnosed, have, even as the terminal illness has gone on, changed their minds and enjoyed making the most of their final days. They would not have had this opportunity if counselled that an immediate option was mercy killing.</p> <p>The relationship with doctors would be changed irrevocably. At the moments doctors seek to preserve life and do all they can to enhance the quality of life, right to the end. With the introduction of such a law, the doctors view-point would shift to one of eventually proposing to a patient that the one who cares for them should perhaps kill them instead, and perhaps be reluctant to support further palliative care. The Royal College of GPs is firmly opposed to this move. Introducing euthanasia will reduce the investment of doctors and resources in palliative care. Doctors must never be forced to undertake any such forms of mercy killing.</p> <p>Wherever mercy killing has been introduced, with those condoning it</p>	Not Answered	
Agree	<p>We already interfere with people's life span by permanent high doses of medication, invasive surgery and transplants so I regard assisted dying as intervening in the same way to relieve suffering.</p>	Not Answered	Any person over 18 years should be able to request assisted dying if their circumstances make them feel that they have such a poor quality of life and do not wish to continue.
Disagree	<p>I believe in pro life. I do not believe in helping/ assisting anyone to end their life, as this goes against my human and moral principles. I believe life must be preserved.</p> <p>The following questions are not applicable to me.</p> <p>Thank you.</p>	Not Answered	
Disagree	<p>It's not Godly and it's not moral.</p> <p>I don't want to answer the remaining questions. It's not applicable for me.</p>	Not Answered	
Agree	<p>We treat our dying/sick animals with more dignity than we do our dying/terminally ill adult human beings.</p>	Not Answered	It's a very tricky subject but I believe there is a place for assisted dying if specific criteria are met, counselling is offered to both the patient and their family and the legalities are watertight and in favour of the patient.

Disagree	<p>I am the Commanding Officer of The Salvation Army - Douglas Corps. Our position of this issue is that we are made in the image of God and every human life is sacred. Life is precious. Life is not our own, but a gift from God. Life requires nurture, and to be cherished to flourish. Furthermore, we are required to care for one another, not least when we are ministering to the ill and dying. Through support of assisted dying may be grounded in the desire to relieve suffering, we do not condone this practice within The Salvation Army. Instead, we are committed to alleviating suffering without deliberately ending life; showing compassion at all times while helping people face up to the enormous challenges that can leave them feeling devastated and desolate, with their faith sorely tested; and drifting into hopelessness and despair. A patient may be vulnerable and may wish to take their own life to avoid for example becoming a burden, or to escape chronic conditions. Others may be driven by isolation (loneliness), helplessness and despair when life becomes unacceptable to them. The Salvation Army supports high quality palliative care, psychological, social, physical and spiritual support of the individual instead. Demonstrating love and a passionate commitment to protect and care for loved ones in society.</p>	Not Answered	<p>I have concerns that introducing assisted dying as an option would encourage suicide tourism and suicide migration. Perhaps people would choose to become residents to make this option available to them later in life?</p>	<p>I have serious concerns surrounding the vulnerability and safeguarding of people who may be coerced into taking their own life for family benefits; such as inheritance. I have read of accounts in Canada where certain older people felt that they were a burden on their family. They felt anxious and worried that they were wasting their families inheritance on nursing homes and medical fees. They felt guilty and subsequently, they felt the pressure to accept assisted dying for themselves. There is big questions around Dementia - for older people to fully comprehend the consequences of their choices responsibly. A huge concern that isolation, loneliness and neglect becomes a driving factor in condoning assisted dying. Huge concerns surrounding medical professionals who will administer assisted dying. What sort of psychological impact will this bear on them over the long-term? I have reservations on basing assisted dying off emotional responses. Making life-changing decisions based purely off our emotions; is dangerous ground in my opinion. Hope must never be abandoned!</p>
Agree	<p>I think a person should have the right to choose whether they end their own suffering and leave the world with some dignity</p>	Not Answered		<p>I think this should be done in a facility such as is done at Dignitas in Switzerland so these medications can be controlled and not in a position where it could be misappropriated if it were to be collected from a pharmacy.</p>
Disagree		Not Answered		<p>The consultation document is flawed in that most of the questions are assuming the person completing the form is in agreement with the bill. There is no option to disagree with these questions. If the statistics used are only from the questions that are answered, they will be distorted in favour of one view only, namely for assisted dying.</p> <p>I feel that assisted dying would further devalue the lives of many people who may be encouraged to give up. The trust in healthcare will be undermined and patient-doctor relationship could be harmed Why waste money on assisted dying and put the money into existing services. This provide improved care, such as is given in Hospice, and provide end of life care with more comfort and dignity.</p>

Disagree	Assisted dying conflicts with the inherent dignity that comes with the privilege of being human. It degrades the value that should accompany a society that values everyone, regardless of their ability or otherwise to contribute to that society. Terminal illness comes to most of us eventually, and the focus should be on enabling terminally ill individuals to suffer as little as possible as they near their end. Assisted dying may tend to lead to the withdrawal of funding for palliative care and also may pressure some into the feeling that they have become little more than a burden on society. That is not compatible with the ideal that how the elderly, frail and vulnerable are cared for is an important marker as to the inherent value of all human life.	Not Answered		
Disagree		Not Answered		
Agree	I believe in the choice for assisted dying.	For over 1 year		
Disagree	<p>The proposals set out in this consultation on Dr Allinson's Private Members' Bill clearly relate to assisted suicide, not assisted dying. Assisting someone to die takes many forms, including palliative care provided by doctors and nurses as well as spiritual support provided by priests and other ministers of religion. Assisted suicide is the deliberate act of helping to end another person's life.</p> <p>Indeed, the proposals in this consultation constitute one of the most extreme versions of assisted suicide anywhere in the world. Permitting people who are not terminally ill to seek assisted suicide, and allowing lethal medication to be collected over the counter of pharmacies, are both deeply worrying.</p> <p>The Catholic Union is resolutely opposed to the introduction of assisted suicide in any form, including the this Private Members' Bill on the Isle of Man. This position is based on the clear imperative in natural law, which is reflected in the teaching of the Catholic Church.</p> <p>This teaching is the product of two thousand years of careful thought and deliberation on human flourishing. It forms part of the wider body of work known as Catholic Social Teaching, which has at its heart the understanding that human beings possess intrinsic value.</p> <p>We strongly encourage Members of Tynwald to focus on improving palliative care for people on the Isle of Man, and making healthcare provision better able to support the needs of an ageing population. This should be the focus of politicians in all parts of the British Isles as we</p>	Not Answered		
Agree	I believe that everyone deserves the right to choose regarding their own life and body. Terminally ill individuals who wish to end their lives should be able to have their wishes respected and implemented by their doctors. Everyone deserves dignity in death, and to ignore the patients wishes would be disrespectful and condescending, causing more fear and distress to individuals already suffering. The safeguards mentioned in the proposal will ensure that this service is used only where appropriate, with thorough consultation before any action is taken.	Other	Unsure, perhaps something similar to models used in other countries?	

Disagree	<p>1. The legalisation of assisted suicide creates additional pressure on the vulnerable. In Oregon in 2020, a majority of people killed by assisted suicide (53.1%) listed concerns about being a “burden on family, friends/caregivers” as a reason to end their lives. [Oregon Death with Dignity Act 2020 Data Summary]</p> <p>2. Disabled people fear assisted suicide. Its legalisation risks reinforcing negative stereotypes of disability adding to the difficulties faced by disabled people. [Not Dead Yet, Disability Rights Toolkit for Advocacy Against Legalization of Assisted Suicide. https://notdeadyet.org/disability-rights-toolkit-for-advocacy-against-legalization-of-assisted-suicide]</p> <p>3. Assisted suicide cannot be controlled. In several countries assisted suicide has been used to introduce euthanasia. Vulnerable groups, including children, infants, dementia patients, psychiatric patients, those who are not dying, and those who have not requested death are then vulnerable to euthanasia. [Catherine Lévesque, “Quebec College of Physicians slammed for suggesting MAiD for severely ill newborns,” 11 October 2022, (National Post, Canada) See also: Mike Brogden, Geronticide: Killing the Elderly (Jessica Kingsley, 2001) 170]</p> <p>4. The majority of doctors in the UK do not support assisted dying. This opposition is strongest amongst doctors who work most closely with dying patients. [https://www.rcplondon.ac.uk/news/no-majority-view-assisted-dying-moves-rcp-position-neutral]</p>	Other	Lives Worth Living rejects the premise of this question as it requires an acceptance of assisted suicide to a greater or lesser extent. The only viable guarantee that children will be excluded from assisted suicide is to reject its introduction completely. The pattern in other jurisdictions has been to extend assisted suicide and euthanasia to children. For example, in Canada, Bill C-7, which received Royal Assent on 17 March 2021) includes a review to consider the eligibility of under-18s ambiguously described as “mature minors”. Dying with Dignity Canada recommends that: “the informed consent of a competent parent or guardian be required for eligible minors seeking	The right to conscientiously object to killing innocent human beings is absolute [cf the Nuremberg Trials]. To help or facilitate the killing of a human being regardless of his or her consent is cooperation (formal or at least material) in an intrinsically evil act. Conscientious healthcare workers should not be asked to be an accessory to killing the innocent. The fact that this may be the situation in other jurisdictions is no reason to make it the case on the Isle of Man. By definition, advanced consent is not informed consent. Permitting final consent to be waived would not allow for changes of circumstances and therefore a possible change of heart. Such a policy could well facilitate incidents similar to the case of a 74-year-old Dutch woman whose death became the subject of international news in 2017. The woman gave advanced approval for assisted suicide before losing mental capacity due to Alzheimer’s. In 2016, the woman’s doctor decided to end her life, she was given coffee containing a sedative so that the lethal injection could be administered more easily. When the sedative failed to have the desired effect, the woman struggled to resist the doctor. She was then restrained by her son-in-law so the drugs could be injected. An investigation found that the actions of the doctor did not violate Dutch law. [“Dutch launch first euthanasia prosecution” 11 October 2018, (Deutsche Welle). https://www.dw.com/en/dutch-prosecute-doctor-for-euthanizing-woman-with-dementia/a-46235109] Such events should not be allowed to occur in the Isle of Man. Patients with a terminal condition who desire suicide or euthanasia often suffer from treatable mental health issues, most commonly depression. When these patients receive appropriate treatment, they
Disagree		Not Answered		
Disagree		Other	Against Several of the questions are not applicable when you have said you are against. Against	
Agree	In principal i agree. In a liberal democracy, it should be a matter for the individual to decide the quality and length of their own life. I disagree also that Church or other religious organisations should be able to impose their view on the public at large for their moral position.	For over 1 year	Becoming permanent resident to just utilise the IOM's assisted dying laws is a very expensive way to achieve such an outcome, and is unlikely to happen. The process should involved doctors at as much of the stage as possible, and should be monitored by professionals at all stage including the delivery and use of ay drugs.	
Disagree	Thin end of the wedge argument. Plus, pressure (intentional or unintentional) when patient emotionally vulnerable.	Not Answered	PROBLEM: This questionnaire is skewed heavily towards supporting Assisted Dying. This question (28) states the bias: ".....on the process TO PROVIDE Assisted Dying." I do not agree with assisted dying. Therefore I cannot answer the biased questions thus far.	

Agree	It is a person's right to be able to end their life if they so wish (being of sound mind).	Not Answered	Biggest concern would be of the mental capacity of the individual. Any sign of incapacity to make this decision should prevent them from continuing with the process. No third party decision should be allowed, in instances of individuals who are unresponsive - this should follow already existing policy/practice.
Disagree	All life is precious and should be preserved, not taken away.	Not Answered	The Bill should not go ahead. All life is of immense value and life should never be taken.
Disagree	Assisted suicide is not permitted under the current Gov(?) law that King Charles sworn to. It is against the God and the Bible.	Not Answered	This is utterly not needed. More focus should be given to Assisted Living!
Disagree	It is not right to play God and to take someone's life with right	Not Answered	
Disagree	All questions below are not applicable due to my answer I don't feel that the few cases where this might be helpful can outweigh the risks to the wider community who for a number of reasons could then be put at risk.	For over 5 years	It just should go ahead at all
Agree		For over 5 years	i believe under no circumstances should the medication leave the hospital. patients or relatives should not be able to collect from a pharmacy and it should not be held at a pharmacy. The individual who wishes to die should take the medication in front of a health care professional at hospital. The medication should not be aloud in peoples homes.
Agree	If quality of life was so bad and end result is terminal, I feel the individual should have that choice. Whilst this survey is about terminally ill patients, I do feel end of life should be considered in other circumstances too which may not be terminal in nature but where quality of live means the individual would like a choice for assisted dying.	Not Answered	
Disagree	The hospital killed both of my parents through negligence, we don't have to encourage them to murder legally they are doing it already under manslaughter !!	Not Answered	You are killing at end of life regardless of any legality, it took 3 days to kill my friend who's son was sick of going to the hospice to see him where was the law then !!!
Disagree		Not Answered	You are doing it anyway !!!
Disagree		Not Answered	
Disagree	people will be "forced" to choose death over life at the end of their lives.	Not Answered	There is no such thing as free choice. We are all slaves and products of our environments. People will choose to die, if this were to be a law. I do not want that to happen.
Disagree	It is unsafe for people who are aging or have health issues to be free to choose end of life, even though they may seem to be free from coercion, and may technically be shown to have full mental capacity.	Not Answered	
	No safeguards can protect people from their own sense of guilt (that they are a burden) or from coercion applied by people close to them.		

Agree	I strongly believe that an individual should the right to determine their own end off life care	For over 1 year	Q.9 - I believe this is not a straight forward question. A patient may have a condition that makes there life intolerable but may not end there life for a number of years.
Disagree	people will feel they are a burden on others and so will want to choose death as their "choice". It is not right.	Not Answered	Q.27 Caveat, subject to additional safeguards Nobody should feel they are burden on some others when they are old. It is bound to happen if this becomes a law. It is so wrong and I want this stopped. I will write my MHK as well.
Disagree	killing people is not what the doctors are for.	Not Answered	People should not be offered a choice to kill themselves. We should protect them when they are old and vulnerable.
Disagree	Having read your Overview these are my thoughts: This is a biased overview and a biased survey. The questions are written in such a way that it is a foregone conclusion this a bill will be drafted. It is impossible to answer all of the questions because most of them make it sound like the respondent is supportive of assisted dying but wants some safeguards including. I have therefore not answered some questions, but this could skew the data. However, I think you will manipulate the data to support your own wish anyway Dr Allinson. Non-residents of the island should not be allowed to complete the survey. What does "and for connected purposes mean"? Assisted dying is not the norm globally. According to your statistics only 2.5% of the world's population have legal access to it in some form. The implications both morally and practically have not been thought through. We do not have enough doctors on the island. We struggle to recruit and retain. Where are we suddenly going to find enough doctors and psychiatrists with the time and expertise to explore reasons, review medical care, consult with other professionals and prescribe etc. What is the lethal oral cocktail that you propose to use? Do you want death tourism. If assisted dying becomes available here it is likely that some seriously ill people will move to the island for the required residency period. 6 or 12 months or whatever you decide Dr Allinson. They will require medical care from Manx Care which cannot cope with current demand. You talk a lot about Palliative Care and Hospice. I understand that where assisted dying has been legalised, funding for and training in palliative care has actually reduced not increased as you claim. Manx Care has provided minimal financial support to Hospice over the years. The money spent on	For over 5 years	Please do not proceed with this Bill. It would be disastrous for the health services on the Isle of Man and for the island as a whole.
Disagree		Not Answered	
Disagree		Not Answered	questions are one sided.

Disagree	<p>I feel the better provision of palliative care for those who are terminally ill is much more important. There is so much that can be done to help even in the later stages of illness that I feel this is where the focus of a caring, compassionate society should remain. Everyone should feel that their lives are valuable right to the end.</p> <p>I feel very concerned if this bill is accepted that many elderly, incapacitated or disabled people will be made to feel their lives are less worthwhile, of less value to their community or they are a burden to their family and to end their life would be a better option. There could be cases where with the very high costs of providing care, financial pressures might lead to a person deciding to end their life. In spite of any supposed safeguards it could be difficult to be sure these pressures or even coercion from family members or carers are not a significant factor in a persons decision.</p> <p>I believe there are parts of the world where similar legislation has had a detrimental effect on the provision of palliative care and the compassion shown to those who through mental health problems feel themselves not worthy of living or that continuing to live is too hard. There should always be great effort put into helping such people to realise the value of their lives and that others appreciate their lives. I feel the acceptance that assisted suicide is "normal" could seriously undermine the treatment of those with both long term physical and mental health problems such that less support is given to assist them to live!</p>	For over 5 years	<p>Many of the questions especially in eligibility and process sections in this consultation ASSUME MY AGREEMENT with the principle of assisted dying, it is IMPOSSIBLE TO ANSWER SUCH BIASED QUESTIONS unless I assume the government has already passed this bill allowing something with which I DISAGREE!</p> <p>I have answered the questions as I would if the bill to allow assisted suicide was already in place.</p> <p>The questions deal with the process and finer details of how assisted suicide will be implemented - IS THIS A CONSULTATION ON WHETHER OR NOT ASSISTED SUICIDE IS TO BE ALLOWED?</p> <p>NO.</p> <p>IT APPEARS TO BE MORE A CONSULTATION ON HOW THE BILL IS TO IMPLEMENTED.</p>
Disagree Disagree	<p>Having seen the pressure put on a 'medically optimised ' person by social services at the hospital I am very concerned that whatever safeguards are in place similar pressure will apply to encourage people to opt for assisted dying.</p>	Not Answered Other	<p>I do not agree with assisted dying.</p> <p>I am very concerned that no matter the safeguards that are put in place people will feel pressured to agree to assisted dying.</p> <p>I hope that we can improve access to palliative care teams and improve the ability of patients to get timely and effective pain medication. I do not believe that this is happening on the Isle of Man at present.</p> <p>I do not support assisted dying or assisted suicide.</p> <p>Some of the questions on this survey are very biased and no relevant option is available for people who do not agree with assisted dying .</p>
Disagree Disagree	<p>totally disagree.</p> <p>law will be impossible to implement in a safe way</p>	Not Answered Not Answered	<p>I do not support this draft bill in any forms.</p> <p>The survey gives the impression the draft will go ahead regardless of people's opinion. Survey and publicity of an opinion poll is also trying to shape the opinion in an emotive and biased way. It is sad.</p>
Disagree Disagree Disagree Disagree	<p>How long I got to live, no one can tell me with any assurance. This is all wrong. People will be killed off for various reasons.</p>	Not Answered Not Answered Not Answered Not Answered	<p>stop</p>

Disagree	Do no harm first This is fraught with dangers	Not Answered	stop the bill.
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree	I'm fully against this assisted dying. It's murder and it's not right. It's against God!	For over 5 years	This is morally wrong same as I said before assisted dying should not be passed.
Disagree		Not Answered	
Disagree		Not Answered	
Disagree	Wen patients nearing the end of life have fears of losing control, support and counseling is needed, not help in committing suicide.	Not Answered	This madness must stop.
Agree		For over 5 years	Shouldn't be allowed to collect medication themselves. Should be administered by a professional. What's to stop me collecting from pharmacy and going on a night out and spiking someone??
Disagree	I feel that life is something that we should cherish in all its forms so to propose an option to allow people to end their life if terminally ill implies that the government thinks that "if your life's going to end...might as well get it over with eh?". Personally I don't thing for any government to push forward but we have seen what happens in other countries when governments put these bills in place, the laws start to stretch to accompany more and more criteria e.g after Canada made a similar law back in 2020 is now pushing for assisted suicide for the "mentally ill" in 2023 and this isn't the only country to have this: Oregan and switzerland have also had these escalating shifts towards broadening the criteria. Also who's going to do this? Asking doctors to agree to ending the lives of their patients when their entire purpose is to preserve life is a cruel thing to have them do. Also imagine what this will do to doctor patient relationships, if the person who is supposed to take care of you offers to help kill you! If this government cares about the lives of its citizens, then it should care about them at ALL points in life and in all conditions! The IOM's palliative care programs have been described as the best in the world, allowing people to finish their life well, to come alongside those who are suffering and offer genuine care and support to not just the one suffering the illness but the families of those suffering. It just seems unnecessary to create a law that allows people to kill themselves when there are many people on this island who work so hard to provide for these people. It implies they're not doing a good enough job even though the world recognises we're the best at doing it!	Not Answered	I think that it's good that patient coercion is being taken seriously here but life is far more complicated than yes/no forms. There are already concerns in countries that have assisted dying laws that people are being coerced and pressured due to financial reasons to opt for assisted dying rather than can continue in paliative care. The danger of introducing a bill such as this is the potential for stretching and the effects it will have on people with other types of illnesses i.e. those with physical/mental disabilities. The option being open to these people could lead them to think of themselves as "not good enough" or a "burden on society". This is a proven pattern in patients that countries have provided assisted dying to. I don't think legalising a way for people to give up on life is a good way of saying you value the lives of your citizens, we need to come alongside those who are suffering. Instead of this bill, I think the government should focus more of their resources to paliative care on the IOM. Let's further bolster this world-leading industry that is doing so much for those suffering here. I would also like to point out that questions 9-27 show a significant bias towards those who are in favor of assisted dying. As someone who is against this I feel that I can't answer any of the questions after number 8 because I don't support this bill! I think there should be a text box in each question to give those who are against this bill the chance to explain their views around each point rather than 3 radio buttons. This more complicated than a simple "yes" "no" response and people need the ability to answer more verbosely to EACH question.
Agree	I believe that human beings have a right to end their lives in dignity at a time of their choosing	Not Answered	There have been times, in the past, on the Island when the only psychiatrists immediately available have been of Catholic faith. I beleive that it is very important to ascertain doctors impartiality if they are to be involved in making decisions which could be contrary to their religious beliefs.

	Agree	To give more agency to the sufferer.	Not Answered		
	Disagree		Not Answered	Do not agree with assisted dying	
	Disagree	<p>I disagree with the introduction of the assisted dying bill in the Isle of Man. The information provided in this consultation and the questions within this survey are skewed in favour of the introduction of this law and have been written with the potential to evoke an emotional rather than a considered response - in particular questions 10 & 11 - no one wishes unbearable suffering on an individual. Our focus should be on ensuring palliative care remains exemplary and is held to a standard where no one suffers rather than introducing a bill to allow people to opt for death due to a lack of confidence in the service that they will receive. This is far from progressive. There is also no information on the pain an individual may experience from the medication that would be used to bring forward death where the body is not ready for it?</p> <p>In addition to the above I believe the proposed safeguarding is too vague and open to individual interpretation. On an island with limited health professionals it would be contentious and decisions could be potentially biased.</p> <p>I would also suggest that it is wrong that the individual proposing the bill will be the one reviewing the feedback and presenting this to government. Surely there is a massive conflict of interest here?</p>	Not Answered		
	Disagree	Morally wrong and always open to abuse.	Not Answered		
	Agree	It should be a decision made by the individual who is approaching the end of their life.	For over 1 year		
	Disagree	Morally wrong - safeguards etc. make no difference.	Not Answered		There should be no draft or any other bill and the whole matter stopped.
	Disagree	There is no need for this. It will be a slippery slope.	Not Answered		Do not want this bill.
					Qs 9-27: N/A

Agree	<p>We believe that patient autonomy includes the right of mentally competent adults to make a voluntary and settled decision regarding the time, setting and manner of their death. We recognise there is scope for reasonable disagreement on the eligibility criteria for accessing assisted dying.</p> <p>87% of Islanders support a change in the law on assisted dying.</p> <p>The vast majority of terminally ill patients do not avail themselves of assisted dying, even in jurisdictions where it has been decriminalised. As such, assisted dying should be correctly understood as complementary to, rather than in competition with, high quality palliative care. It is entirely consistent to believe that assisted dying should be legal while well-funded, gold-standard palliative care should be available to all.</p> <p>But is it undeniable that even the best palliative care cannot alleviate all suffering in all cases. This suffering can come in many forms, including but not limited to: physical pain, nausea, immobility, incontinence and indignity.</p> <p>It is well known that, even where access to high quality palliative care is available, serious illness is associated with a higher risk of suicide. A 2022 Office for National Statistics analysis found, for example, that the suicide rate in English patients with low survival cancers was 2.4 times higher than the general population. There is no reason to believe this data would not be replicable in Jersey.</p> <p>Marjorie Wallace CBE, chief executive of mental health charity SANE, has said traditional suicide prevention measures "are not an appropriate response" for those who are nearing the end of life and wish to ease the</p>	Other	<p>The National Secular Society does not have a position on whether individuals wishing to avail themselves of assisted dying on the Isle of Man must be permanent residents.</p> <p>The NSS believes everyone should have their say when it comes to assisted dying reform. However, religious dogma should not be considered a rational, compassionate, or legitimate basis for policy making. It is not for the state to impose religious dogma on citizens. Furthermore, religious groups should not resort to fearmongering and misinformation in their efforts to oppose assisted dying.</p> <p>The Isle of Man Broadway Baptist Church states in its opposition to assisted dying reform: "A concern for personal autonomy regarding end of life choices needs to be weighed against care for people who live with disabilities, physical and mental impairments, or people with obvious or hidden vulnerabilities."</p> <p>This, deliberately or otherwise, fails to acknowledge that support for assisted dying reform amongst the disabled community exceeds that amongst the general population. Furthermore, individuals with "mental impairments" which deprive them of the capacity to make decisions about assisted dying would not be able to avail themselves of it under the proposed changes.</p> <p>They continue: "a change in the law would in some cases lead to a greater concern for relieving the family's suffering (or bank balance) than for the best interests of their elderly relative."</p> <p>The law as it stands contains no prospective safeguards for those considering assisted dying. By contrast, the proposed changes would ensure two independent doctors were satisfied that the patient's</p>
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Disagree	<p>The consultation states: “Where assisted dying is legal the evidence shows that such laws are safe and effective.” In reality there is simply no safe way to legalise assisted suicide.</p> <p>- Harming the vulnerable</p> <p>Introducing assisted suicide will inevitably affect how, for example, elderly and disabled people view their own worth, and how they are viewed by others. It would plant the idea in the minds of some of the most vulnerable in our society that they are worth less than others.</p> <p>The value of a human life is not based on perceptions of someone’s autonomy, contribution or capacity. Once we start ranking the value of people’s lives in this way, we breach a fundamental principle which protects everyone: that all lives are of equal value. Conceding this principle will have far-reaching consequences for our society. The law must not affirm the idea that some lives are not worth living. It sends the terrible message to suffering and vulnerable people that they have a duty to die.</p> <p>Many disabled people are understandably fearful about what the future may hold for them and do not want the law changed. [1] The Chief Executive of Scope, which campaigns for the rights of disabled people, has said that many disabled people “too often” are looked on as a burden and as if it is not worth their being alive. [2] Where assisted suicide or euthanasia are legal, concerns about being a burden become a matter of life and death. Over half of those in Oregon who died by assisted suicide in 2020 and 2021 cited the fear of being a burden on others as a reason for</p>	Not Answered	
Disagree	<p>Genesis I - God created the heavens and the earth. Jesus came that we may have life more abundantly. John 10 v 10 not to kill.</p>	Not Answered	<p>Genesis I v 27 God created man and women in his own image / John 3 v 16 for God so loved the world that he gave his one and only son that whoever believes in him shall not perish but have eternal life.</p>
Disagree	<p>The death of an individual affects more than just the individual. It’s the thin end of the wedge - having the option present could lead to insufficient care when caretakers want to take the easiest path. A terminal diagnosis is also not as certain as you might first think.</p>	Not Answered	
Disagree	<p>Assisted dying (or suicide) is murder. Since murder is illegal, this puts all MHKs in an invidious position. Since they swear allegiance to the Lord of Man (i.e. King Charles III) who next May will take an oath to uphold the laws of the land (all the British Isles), which since AD 800 King Alfred deemed to be the laws of the Bible (Moses).</p>	Not Answered	<p>Qs 9-27 - Not applicable</p>
Disagree	<p>1. Such a law is uncontrollable and unenforceable as shown in Canada, for example.</p> <p>2. Unethical - against doctors' conscience and desensitises [illegible] towards killing.</p> <p>3. Unnecessary as palliative care very good here.</p>	Not Answered	<p>Diagnosing terminal illness is imprecise. Assisted dying with drugs is slow and painful vs good palliative care. Society's ethical standards would be lowered. You may publish my response in full. D. Taubman.</p>
Disagree	<p>Strongly disagree. It is against God's law and therefore against the Coronation Oath Act 1688.</p>	Not Answered	<p>Q9-15 - N/A</p>

[illegible]

Disagree	<p>Consideration of any law change must take into account the impact not only on those determined few who would welcome this but also on the vulnerable many. To quote Lord Walton who chaired a Westminster Medical Ethics Select Committee which examined this issue in 1994:</p> <p>We were ... concerned that vulnerable people - the elderly, lonely, sick or distressed - would feel pressure, whether real or imagined, to request early death.</p> <p>[Hansard HoL 9/5/94 Col. 1346]</p> <p>Such pressure could be from others or even self-imposed, consciously or sub-consciously, from a sense of duty once this comes to be perceived as an acceptable, or even favoured, option. This concern is ever more supported by burgeoning evidence from elsewhere, despite claims to the contrary in the consultation brief. For example, in Oregon fear of being a burden is cited by more than half of those who end their lives this way.</p> <p>The listed proposed safeguards could not prevent this cultural shift nor identify its impact in assessment.</p> <p>The proposed restrictions also provide no assurance: As experience elsewhere demonstrates, once assisted suicide / euthanasia (assisted dying is misleading terminology) is legalised it will be presented as a “right” with limits challenged as discriminatory and then eroded. Assurances to the contrary are worthless since no legislature can control the decisions of its successors.</p>	For over 5 years	<p>I have left many questions unanswered because providing an answer could be interpreted as implying support in principle for legalising assisted suicide / euthanasia.</p> <p>A few comments regarding some of the questions:</p> <p>#15</p> <p>Some doctors would take a less cautious approach than others. Please consider the implications if the patient (or their coercive relations?) can nominate the doctors.</p> <p>#16</p> <p>As noted under #8, the inevitable cultural shift will have an adverse impact on doctor/patient trust and thereby on patients. But experience re abortion suggests it will not stop there. Now anyone considering becoming an obstetrician or midwife but who has a conscientious objection to abortion is effectively excluded. That denies pregnant women with problem pregnancies access to doctors they can trust to advise in the best interest of both mother and baby. Will it not be the same for the vulnerable? Longer term the right to conscientious objection has no value for vulnerable patients and they will be denied access to a doctor they can trust.</p> <p>#17</p> <p>All should have a psychiatric assessment.</p> <p>#18</p> <p>Genie is best left contained within the bottle.</p> <p>I do not agree with this Bill in any way shape or form.</p>
Disagree		Not Answered	
Disagree	<p>I think young people will use the law to kill themselves, no one can stop it. It is best if we stop now, not change the current law.</p>	Not Answered	
Disagree	<p>I am against this in any form (assisted dying) - not completed further.</p>	Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree	<p>Only God knows and can say how long a persons life is and when they die.</p>	Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	

Disagree	Because it is murder	Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Disagree		Not Answered	
Agree		For over 1 year	In answer to question 20 I would have thought that the cooling off period between the decision being taken and acted upon should be at least a month. Two weeks seems like an alarmingly short period.
Disagree		Not Answered	I feel it is a process that should not be considered. The weak and vulnerable deserve our care, concern and respect - this is not supported in the concept of Assisted Dying. Life is a gift from first breath to last - not to be shortened by our intervention or lack there of.
Disagree	The priority right now should be on making sure that excellent end of life care is available to all Island residents which is not the case. It is unacceptable to put pressure on vulnerable people. To put the focus now on progressing facilitating suicide appears a cynical way of avoiding providing the adequate medical and palliative care. We should not be looking at how to help people die until we have a robust, successful system to help those people who want to live. Other places going down this route (like Canada) have had the initial safeguards eroded and	For over 5 years	Assisted dying should not be progressed until a clear process is defined, funded and implemented for end of life care for the those wishing to live. This should include both medical and counselling aspects with mental health for the ill an important element. An option for assisted dying can be reconsidered in the future as a component of this , but should only be a minor element in the holistic support of the end of life needs of the population.
Disagree		Not Answered	I totally oppose this, I am concerned for the protection of vulnerable people.
Disagree	I think that it is too difficult to safeguard against people being pressured into it.	For over 5 years	The questions in this consultation feel really loaded, and not really thought out. On that basis alone, I don't think this is consultation is being done in good faith.
Disagree	This is against the law of God who is the one who gives and takes life. In Canada, CHILDREN are now being offered and without parental knowledge. This is dangerous. Our lives are in God's hands and not the whim of officials.	Not Answered	I disagree with assisted suicide and view it as murder. Do not go down this route or the day will come when you will regret it.
Disagree	God created life - only God can take people home.	Not Answered	

Disagree	<p>I cannot accept that the needs of the few should negatively affect the lives of the many and sadly this is my view of assisted dying.</p> <p>In all jurisdictions that have implemented this kind of law 'mission creep' leads to more and more categories of people being allowed to ask for help to die and the numbers rise over time. If we recognise the truth of this then any law passed now will inevitably be amended and it becomes a thin end of the wedge which ultimately allows for assisted dying for any and all pain, even temporary psychological pain.</p> <p>We also currently do not accept that bringing forward a person's death is an acceptable thing to do and this law would blur this historically clear boundary. I am then concerned that this blurring of the boundary with a legal way to facilitate death will inevitably be be used wrongly and possibly maliciously. I can easily for-see individuals choosing to die to 'make it easier for my children' or because the spouse exerts coercive control and manipulation. Any safeguards are only as good as the people using the system and the organisational structures set up to oversee them. One early and wrong death would outweigh the potential benefits for the few that this bill would be intended to help.</p> <p>My professional experience as a geriatrician exposed to dying on a daily basis also informs my thoughts. The vast majority of deaths in people who's time has come to die are peaceful and well managed. The alternative to assisted dying, and my current practice, is not to facilitate an early death but to allow people to choose whether they want life prolonging treatment. Then, when they make a choice for care aimed at quality of life only, I aim</p>		Other	<p>I do not agree with the questions as they are leading and ignore those who are fundamentally opposed to the bill</p>
Disagree	<p>Leave it in the hands of God. Let nature take its course. I am against assisted Dying and will not be filling no.9 to no.27.</p>	Not Answered		<p>I am against assisted dying and I think it's totally unfair on doctors to be asked to assist in any way.</p>
Agree	<p>Because it will allow people to die with dignity and to end unnecessary suffering.</p>	For over 5 years		<p>I do not wish the Island to become a place for others to move to in order that they may have their death assisted. It would be good if our Island could establish a system that sets an example to other jurisdictions.</p> <p>It is very important that we put an end to suffering at the end of life and give people choice. But equally it is important that nobody is made to feel they are a burden on society because they require care to live.</p>
Disagree	<p>It's not right</p>	Not Answered		
Disagree	<p>It is a violation of the 6th Commandment - 'Thou shalt not kill'.</p>	Not Answered		

[illegible]

Disagree	Not Answered	<p>Many of us are aware of people who find life very difficult and for whom we may empathise with their desire to end their lives. When this desire is combined with a terminal illness there may seem to be little good reason to try too hard to sustain that person's life.</p> <p>There are good reasons however for the state not to assist or sanction the premature death of anyone.</p> <p>People should be regarded as ends in themselves, otherwise the value of each human life will simply form part of a utilitarian calculus. Those living on the margin, those who are vulnerable, despised, or troublesome, may come to be regarded as best eliminated so the rest of us can be spared the expense and effort of caring for them.</p> <p>Canada provides a worrying precedent. In 2016 Bill C-4 introduced a limited assisted dying regime, similar to that now proposed for the Isle of Man. In 2020 that was expanded by Bill C-7 to allow medical assistance in dying to someone suffering from an illness or disability which 'cannot be relieved under conditions that you consider acceptable'. A terminal illness is no longer a requirement. Successful applicants for MAiD now include those who wish to end their lives because of their poverty or depression.</p> <p>So although the original legislation was couched in relatively narrow terms, within a few years it cleared the way to a considerable widening of the scope of assisted dying. Rather than help those enduring financial and other forms of hardship to overcome their</p>
Disagree	Not Answered	

Disagree	<p>It is impossible to introduce euthanasia or assisted dying/suicide safely. The very act of changing the law will adversely affect how vulnerable people and others view their worth.</p> <p>There is no way to ensure that the vulnerable are not manipulated or coerced into requesting death out of a sense of duty to their families. Neither is it at present possible to ensure that the death itself will be pain-free and quick, given the lack of rigorous testing of the cocktails of drugs given to induce death. On occasions, it has taken over 100 hours for someone to die.</p> <p>Evidence from other countries shows that once euthanasia/assisted dying/assisted suicide is introduced, safeguards (which come to be seen as barriers) are reduced and criteria widened. For example, Canada is introducing assisted suicide for mental health sufferers and Belgium and the Netherlands allow disabled infants and dementia patients to be euthanised.</p> <p>The Royal College of GPs, the Association for Palliative Care of Great Britain and Ireland, the British Geriatrics Society and leading disability rights organisations, such as Scope and Not Dead Yet, all oppose changing the law to allow euthanasia and assisted dying/suicide.</p> <p>Freedom of conscience must be maintained and no healthcare professional should be forced into participating in ending a patient’s life. Other staff should be free not to facilitate such procedures and care home owners must be allowed to chose whether or not they allow euthanasia or assisted dying/suicide on their premises.</p>	Not Answered		<p>The proposed minimum period of 14 days between first request and termination of life for a terminally ill person is extremely short. A diagnosis of terminal illness is likely to produce feelings of desperation and depression and this is the wrong frame of mind in which to make a life or death decision. It takes time to come to terms with a diagnosis and a fortnight is not long enough. The minimum time period should be extended to allow sufficient time for reflection and for an exploration of all the options available. The law should protect people at their most vulnerable moments, not offer suicide as a way out.</p> <p>I believe that this proposal to allow assisted dying/suicide, far from being ‘kind’, is extremely detrimental to the most vulnerable in society. Evidence from Oregon, Canada, Belgium and the Netherlands shows that safeguards are quickly weakened, criteria widened and deaths increased once these practises are legalised.</p> <p>Ensuring the availability of high quality palliative care should be the aim of the Tynwald and it would be a fitting way to show true compassion for the terminally ill. However, this is expensive and the risk is that investment in this type of care will be reduced if euthanasia and assisted dying/suicide is legalised, putting further pressure on the vulnerable to choose this ‘option’.</p>
Agree		Not Answered		
Disagree	<p>It is simple. The Almighty God who made heaven and earth and who creates each person has commanded that any person shall not murder. It is prohibited by God to kill any person, including oneself. Suicide is murder of the self. Assisted dying or whatever name you would like to call the process of a person killing him or herself with the help of others is suicide, nothing else. A society who believes in God and lives by his commands as are clearly written in the Bible will not even contemplate such sinning against the Word of God. It is a very sad indication of the levels of departure from the Word of God that members of our society and even worse of our Government is prepared to stoop to who contemplate and propose bills like these. God calls on them to repent, to depart from these ways immediately and return to Him. I ask of the members of Tynwald to carefully consider whether they want to take this Island on a road of departure from its history as a God fearing nation with legislation of this nature. It is a classic example of people wanting to interfere with and ignore the laws of God and take matters into their own hands.</p>	Not Answered		

Disagree	<p>I believe that we should focus on palliative care for those who are ill, rather than assisted suicide. Whilst I fundamentally disagree with the principles of assist dying, I am also carer for a disabled person and have seen in other countries where they have assisted dying that over the years there is creep in the remit.</p>	Not Answered		<p>I have found the whole set of questions extremely biased. They almost entirely assume that someone is in favour of assisted dying. I am not sure how in a democracy we can expect a fair reflection from the consultation, when it is so heavily weighted in one direction.</p>
Disagree	<p>I want to live in a society that helps those that are suffering in whatever way, to live well, rather than allowing doctor assisted suicide. There should be access to palliative care for all & there should be support (physical, psychological, emotional...) for all, even those that haven't been diagnosed with a terminal illness. The reality is, we are all terminal as soon as we are born. None of us will escape death.</p> <p>If this bill was law & someone is suffering, especially if mentally, they go to the dr & are given the option of a 'death prescription' or put on a waiting list that could potentially be years long. I don't want that to be the option. We need to fight for better care &support for those that are suffering.</p> <p>If someone is hurting themselves due to psychological/emotional pain, or they are feeling suicidal, then doctors &others try to help them. At times they could be sectioned so that they don't seriously hurt themselves. I am concerned this would be undermined if this proposed bill came into being. Why is it ok for some people to end their life but not others? I know of people who would agree with this proposed bill, yet don't agree with suicide.</p> <p>I am concerned that there is a financial aspect to this proposed bill, as it would no doubt be cheaper to 'kill' someone, than it is to provide adequate &timely support for an indefinite length of time. Is this the plan of the treasury minister?</p> <p>Would people be tempted to move here with health conditions in the hope of benefiting from this law later in time? That would put extra strain our</p>	Not Answered	10 years	<p>This consultation is biased. I am unable to answer most questions without implying that I agree with the proposal. Also, how independent is it? Why are people outside of the IOM allowed to take part?</p> <p>I am concerned that there is a financial aspect to this proposed bill, as it would no doubt be cheaper to 'kill' someone, than it is to provide adequate &timely support for an indefinite length of time. Is this the intended plan of the treasury minister?</p> <p>Would people be tempted to move here with health conditions in the hope of benefiting from this law later in time? That would put extra strain our our services.</p> <p>Dementia has in other jurisdictions been included in the scope, but without removing safeguards how do you balance a 6 month prognosis &capacity? Mental illness has also been included in other jurisdictions. It was horrifying to hear of a young lady in her 20s being euthanised because she had PTSD.</p> <p>How can a dr say someone with a mental illness has capacity for assisted dying, but yet say to someone else they need treatment? I have a friend who has been in psychiatric units on & off for over 20 years, many times under a section, but is still fighting to get well, and thankfully the NHS are trying to help her, albeit with limited resources. I want there to be better help for people who are suffering, not the access to assisted suicide.</p>
Disagree	<p>I am worried that it will place a burden on older members of society to end their life prematurely so that they will not be a burden to society. There are plenty of options for people to go to another country if they wish to end their life in this manner. I fully understand that there are people struggling with serious illness, but maybe we need to look at the level of treatment that is given and whether there are other options in those cases - my Dad suffered from a long term cancer and was very ill for over 10 years, It was awful watching him suffer, but I feel that the last 8 months of his life were only prolonged by the high levels of medication that were given to basically keep him alive.</p>	Other	N?A this should not be available	<p>I don't think we should open the gate to this option for people. If people choose to take their own life, they will find a way. Sadly there is no fairytale ending to life - we have to accept that.</p> <p>'Advances' in medicine sometimes just mean we are keeping people alive - there has to be a point where we stop administering meds and accept that no more can be done.</p> <p>In this life there is only one certainty - and that is that it will end - we obviously want to make the end of peoples lives as peaceful as possible, but we have to look at both sides of the argument and decide when to say no more treatment i.e. chemo, radio, immunotherapy.</p> <p>There are many other medical complications and I am not aware of how they are treated, but the Health Service is already overstretched - we are paying for 16 year olds to have sex changes, and all sorts of things that were well without the remit of the original NHS goals - we have to stop somewhere and fix the problems we already have.</p>

	<div>Disagree</div> <div>A weakness of the proposed legislation is how can an individual seeking assisted suicide be safely and comprehensively assessed by others, so as to justify such a final and absolute solution (to kill them) from which there is no return.</div> <div>This proposed legislation lends itself to the following serious concerns: - a mechanism by supposed family and friends to adopt for purely selfish reasons as a legal way to get rid of an unwanted relative. - conversely the individual may feel obliged to consider assisted suicide as a way to stop being a burden to others, who may not want the person to go by other than natural causes. - the UK has good quality palliative care for those who are terminally ill and to legalise assisted suicide will inevitably lead to the severe reduction of such palliative care being progressed and extended. - finally the 'speed' of the assisted suicide to be effective can take much longer than anticipated thereby entertaining a painful and excruciating experience for the individual concerned.</div>		<div>Not Answered</div>		<div>No</div>
	<div>Disagree</div> <div>Assisted suicide is a danger to disabled and vulnerable members of society. Many UK disabled groups and medics are against it. People who are ill may feel pressured to take this option were it available, wrongly seeing it as reducing the burden on family and friends. We have good pallative care on the island.</div>		<div>Other</div> <div>I am against assisted dying, so the questions posed are irrelevant</div>	<div>I am against assisted dying. As such the questions on the process were redundant.</div>	
	<div>Disagree</div> <div>There are many ways for people to die peacefully - Leaving it to the Govt to decide on these matters will only end badly. Governments ALWAYS end up abusing powers to save moeny.</div>		<div>Other</div> <div>don't agree for killing anyone on the Isleand</div>	<div>These questions are leading and biased</div> <div>15. Do you agree with the proposal that two different doctors should meet with the person independently and establish they are mentally competent to make an informed decision without pressure or coercion? Yes No Not Sure</div> <div>If I answer Yes or No to this question, it would assume that I either want one OR two doctors to make the decision. The truth is that I do not want any Doctor to do this. This is a terribly badly designed survey and any University would decline any undergraduate from using this as a survey.</div> <div>It has so many leading questions without the opprotunity to opt out. Come on Isle of Man Govt, You are better than this.</div> <div>If you can't get the survey right, what chance do you have when it comes to managing the process of assisted dying.</div> <div>It's a no from me, I'm out.</div>	

Agree	Having watched a close relative die with a terminal illness there needs to be an alternative.	Not Answered	
Not Sure	Animals are treated with more kindness and respect. The design of this consultation raises concerns . I feel obliged to click on "not sure" with comments made at the end	Other	<p>I would like to bring to your attention to concerns as a General Practitioner and Medical Ethicist regarding the existing online consultation on Assisted Dying</p> <p>RE Validity of the questionnaire</p> <p>According to Dr Allinson , in a talk given to his colleagues recently , this consultation was based on the Scottish Consultation on the same topic. However on reviewing the Scottish consultation SC there are some important differences; The SC is part of comprehensive , 39 page referenced document that included the draft proposal which in turn gave clarity on definition of terms , aims, process , implications the consultation itself per question offers 6 tick boxes and a box for comments All of the above allow for wider and fairer data collection from the public</p> <p>By contrast the current IOM consultation on AD, A. Is an 11 page document containing quotes that are not referenced B. Does not include a draft proposal. Therefore there is insufficient clarity on the various terms and propositions asked about C. The Questions themselves: Total of 28 . Seven are on demographics. The remaining 21 include only 2 questions were a comment box can be filled in and the remaining19 questions have only 3 tick box options and no comment box option</p>

Agree	<p>This is a very complex and complicated topic. I agree in principle but am concerned about patients with degenerative disorders such as motor neurone disease [MND] and other such conditions. Will adults with these conditions be eligible or not qualify in the latter stages of the disease as they may or may not be considered as "terminally ill".</p>	For over 1 year	<p>The issue of capacity assessment needs to be undertaken by a professional competently trained in carrying capacity assessments, rather than necessarily a psychiatrist. it is the skill and competency that matters rather than just the professional discipline.</p> <p>Regarding item 12- age . In my opinion the lower age limit is to do with the individual's understanding/maturity/mental capacity . If a 16 year old has mental capacity I would recommend that they should be eligible to express their opinion and make the decision regarding requesting assisted dying.</p> <p>re item22- regarding ability to collect the medication from a pharmacy. As well as the adult themselves or a relative, I would add that an appropriately authorised representative of the adult be considered, in the situation where the adult is unable to collect the medication but a relative may not want or be able to do so.</p> <p>overall my understanding of the research literature suggests that adults who request the facility of assisted dying most commonly are concerned about the risks and distress of loss of control and dignity rather than uncontrolled pain. This highlights the problems of debilitating diseases and neurodegenerative diseases and conditions. I hope that in drawing up the proposed legislation particular consideration will be given to adults with these types of irreversible conditions</p>
Disagree	<p>1. I feels it would be abused</p> <p>2. In Canada where assisted dying is law, now Canadians living with severe mental illness could also be eligible under the law. This is exactly what will happen in the Isle of Man and we all know that people with mental health have bad days and want to end it but good days do come. I had a friend and three years ago he had enough with mental health, tried to take his own life however today he is now a DAD and happy in a relationship should that have been an offer he would've took the option of assisted dying when he was at his lowest, how can this be allowed.</p> <p>3. God is the giver of life not man.</p>	Not Answered	<p>I DO NOT AGREE WITH ASSISTED DYING.</p>
Agree		For over 1 year	

Disagree	<p>Assisted dying should not be permitted for anyone. The current law in England/ Wales has the protection of the vulnerable at its core. For this reason the majority of doctors (especially those involved in palliative care) in the UK, oppose legalising assisted suicide. Any changes to the law would not only alter the trusted relationship between doctors and patients, but would also remove protection for patients who may be pressured into considering being killed as a “treatment option”. The existing law serves as a strong deterrent to those who would exploit or abuse the vulnerable. Other countries that have legalised assisted suicide have found that once the “right to die” is established, the limits on who hold this right are persistently extended and the safe guards that used to protect the vulnerable no longer apply. For this reason, all major disability groups in the UK strongly oppose changes in the law, as it will undoubtedly increase prejudice against them and pressurise many of those struggling with disability to end their lives. Our nation has built laws and a health care system on the foundation that human life is sacred and life preserving care should be extended to all who need it. No ones life should be cut short by mans actions, God is the one who gives and takes away, only He holds the authority and wisdom to take such action. With the cost of living crisis and persistent NHS shortages it is highly likely that once certain groups of people are seen as disposable, they will be disposed of by means of such changes to the law.</p>	Not Answered	<p>The majority of the questions asked here have left no room for those of us who strongly oppose assisted dying and want to be able to answer that assisted dying/ suicide should not be legalised. This consultation is strongly bias towards legalising assisted suicide, which is deeply troubling.</p> <p>Legalising assisted suicide posses great risk to society! What will it be like to live in a society that relies upon ending the lives of people who are suffering? Don’t we all suffer? Should we encourage society to expect people to kill themselves once life becomes hard or certain people appear a “burden on society”? Surely the holocaust was not so long ago that we have already forgotten the fact that once the State can legalise killing people, it can commit horrific atrocities such as the ones Hitler and the Nazi's did. God is the one who gives and takes away, only He holds the authority and wisdom to take such action.</p>
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	<p>Disagree</p> <p>I believe that bringing this law into being would be a slippery slope. Although your briefing only speaks of its apparent success in countries where such legislation is legal, there is ample documentation of the abuse that such a law is open to, and where it has been 'stretched' to accommodate situations outside of its original parameters. The evidence of the psychological impact on medical practitioners who have to prescribe/administer the medication also underlines how unnatural a step this is.</p> <p>I believe there are some noteworthy medical actions that we could take as an island to set ourselves apart and extend our medical reach, but having a reputation for allowing assisted dying should not be one of them.</p>	<p>Not Answered</p>		<p>I have many concerns around the possibility of this proposed Bill becoming law. A patient who is 'terminal' is already in a vulnerable and likely depressed place because of illness or disability, or the weight of being a burden to family and friends. With the availability of palliative care, their decision around assisted suicide should certainly not be a financial one but the risk is that it may still be the driver for their decision.</p> <p>Moreover, there are reasons that could cause individuals or groups to encourage a patient to request euthanasia, from reduced health care costs to the guilt or a duty of care, or even to advance the receipt of an inheritance, to name but a few scenarios! How can you ever be sure that legislation would be water tight enough to protect the vulnerable.</p> <p>Dementia poses an incredible risk. I quote the example of a Dutch woman with dementia whose family restrained her to allow a doctor to euthanise her in line with an advance directive on her part. When the doctor and the family tried to conduct the procedure the patient resisted and said 'no' three times. The Doctor put a sedative in the patient's coffee and she was held down by her son in law while the doctor administered the lethal drugs to end her life. At a subsequent trial, the doctor was acquitted and later the Supreme Court of the Netherlands confirmed that doctors acting in this way is compatible with the Dutch euthanasia law. The courts ruled that the doctor did not have to verify the current desire to die. The fact that it went to trial and ultimately to the Supreme Court speaks of the level of risk involved. Clearly the woman was lucid and able to recognise what was being done to her and voice her objection.</p>
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Disagree	<p>Once it is ruled that some people can be killed, whether masked as compassionate or not, it is a very slippery slope! For example, in Canada, where assisted suicide was made legal for some medical conditions, there is evidence that the real reason these people are seeking euthanasia is because of dept, poor housing or difficulty obtaining medical care. Under such laws it is inevitably the poor, needy, vulnerable and disabled who suffer the most. No “safeguards” against abuse will be adequate. Limits on who has the right to die and who has the right to assign or refuse euthanasia are persistently changed in countries that have allowed such things and this is very dangerous. We only have to look at the holocaust to realise the evil that can be done to a nation when the state empowers itself with such authority over peoples lives.</p> <p>Any change to the existing law in England and Wales will put vulnerable people at risk as they often fear being a financial burden on their families and lets face it, it is not unusual for family feuds to break out surrounding costs of care and inheritance. If a right to die is established, there will undoubtably be those who loose their lives unjustly and this is simply unacceptable! The distance between assisted suicide and eugenics is really no distance at all. As a country we would do better to prioritise good health and palliative care rather than authorise assisted suicide.</p> <p>Assisted suicide is not health care and the vast majority of UK doctors are opposed to assisted suicide, especially those who work in palliative care. Qualifying doctors often make commitments to “do no harm” to their patients. If killing their patient is not a breach of this commitment, what is?</p>	Not Answered	<p>No level of safeguards will prevent innocent people from dying premature deaths once people are allowed by law to kill other people.</p> <p>We only have to look at the holocaust to realise the evil that can be done to a nation when the state empowers itself with such authority over peoples lives.</p>
Disagree	<p>Not enough information to make decision to end life. A terminal illness may be of slow progression, with little affect to quality of life over time. A diagnosis should not be the trigger to end a life.</p> <p>It seems all other questions in this consultation seem to assume that there is agreement with the proposal, making answering each aspect difficult. ‘Not sure’ is the only option available, which does not in itself show a negative response. As I disagree with the proposal itself, I have to leave answers blank to make sure they are not misunderstood.</p>	Not Answered	<p>See initial comments on this consultation process.</p> <p>I believe in the sanctity of life and in better provision of palliative care for all and support of patients and their families.</p> <p>I am concerned that this is the tip of a slippery slope, with decisions being made for the wrong reasons.</p>

Disagree	<p>It is a dangerous precedent to set which opens the door - as in Canada - to using it as an excuse euthenase people for all sorts of other reasons and for using unscrupulous persuasive tactics.</p> <p>It goes against the Hippocratic oath taken by doctors.</p> <p>It is totally unnecessary given the palliative care that there is already in place and available.</p>	Not Answered	<p>This bill would be assisting in suicide. Immediately there would be ethical and moral problems for anyone who sees suicide as wrong. It could pave a way for coercion, either for the doctors concerned or families, vulnerable people could be at risk, consciences could be overridden. Take for example the Sunday trading laws; originally employees were allowed to opt out on religious grounds but that has mutated into unacceptable where employees are fired or coerced into leaving if they do not agree to work. I could see the same thing happening with this. There is also the effect of knowing you (healthcare person) had a hand in deliberately killing someone and how that would affect the mental state of that health care worker going forward, let alone the patient's family. New medicines and procedures are continually being developed which might at a later date give that person longer to live a life of quality. The patient's wishes to live could be overruled which I believe has already happened in other countries. Anyone with a terminal illness or disability could be open to abuse. Then there is the question of lethal drugs in the wider community. Is that wise or desirable, especially given the drug related crime on the island. There is always the cynical financial implication as well, of saving money on care by dispatching that person. Where is the humanity in murder?</p>
Agree	<p>I believe this is a matter for the individual to decide. We should be given choice.</p>	Not Answered	
Disagree	<p>We already have excellent palliative care, which help loved ones live their last days feeling valued, cared for, making the last days count.</p> <p>Terminally ill diagnosis can be wrong and life expectancy estimates can also be wrong.</p>	Not Answered	<p>The idea of including other non terminal conditions in this legislation is frightening & disturbing and does not protect the vulnerable eg those with disabilities.</p> <p>It makes no sense in promoting this issue when suicide is already a huge issue on our island and our government is being asked to do more to prevent them.</p> <p>My previous statement stands, it is a no from me because I know it wouldn't be handled properly</p> <p>Also this questionnaire was really hard to fill out from the perspective of a no vote, it was all framed around it being passed</p>
Disagree	<p>I know that if it was done right, it would be a good thing, but I know it won't be administered properly and there would be loop holes in the systems, other countries are regretting it now. I believe that if someone is truly ill and wants to engage in this then they should be able too, but they would need to ask twice and be conscious and alert enough to be making the decision, if it did get introduced I think it should be a thing someone decides prior for example, do not resuscitate (DNR) is decided beforehand, and so is donating your body to science. I don't think anyone other than the individual should be able to make that decision, but also people with deteriorating mental health should be treated rather than put through this</p>	Not Answered	
Agree	<p>We do not allow animals to suffer so why should we, if the person is terminally ill and wishes to not be in pain they should be allowed to make the decision if they want to have assisted dying.</p>	Not Answered	
Disagree	<p>It is unethical and will open the door to further legislation which will put vulnerable people at risk.</p>	Not Answered	
Disagree		Not Answered	

Disagree	<p>This is a sanctity of life issue. In our family we believe that Almighty God gives life and only God has the power to take it. Life is a precious gift from conception to natural death. A civilized society should never have the option to kill or demand to be killed, nor should the question arise. Palliative loving end of life care should be available and support to those when who wish to remain at and as necessary those who choose to care for their terminally ill home of as long as practical. Any other philosophy leads to an undermining of the value of life and the creed of our dedicated medical profession. Such a law encourages the victim to feel of lesser value and burdensome to society and their family. and may encourage the unscrupulous to manipulate the weak to commit suicide. Already statistics show over 50% of victims feel an obligation to die. It also encourages people who are born disabled to feel they are unvaluable and better off dead. Brutal economical decisions rule who is valuable and should live and who should die and all this is going on at a very vulnerable point in a person's life.</p>	Not Answered		<p>This bill should not be tabled. The focus always must be on care and the best possible comfort provisions. There already exists sufficient understanding and compassionate medical and social counselling conversation in the case of a person's life support system having no further medical use. Natural death will then be the compassionate result under palliative care oversight.</p>
Disagree	<p>I want to die a natural death, I'd rather wait. I have a child who is non verbal I am scared that when I am gone, he won't be able to express his desire to live and the system would decide for him.</p>	Not Answered		
Disagree	<p>I do not support this proposed legislation on the grounds it will lead to uncontrollable expansion of its impact to those who are vulnerable over time. It is unethical and I believe there are other ways to provide support through palliative care methods to support the terminally ill.</p>	Not Answered		
Disagree	<p>With mental health issues on the rise, and not all diagnosed or apparent, I believe the law needs to protect the lives of those who cannot see another solution to their suffering, rather than assisting them to end it all. It might seem like the 'compassionate' route to end suffering but I think it sets a dangerous precedent for how we determine the value of human life and safeguard the vulnerable and it compromises doctors' professional duty to preserve life. I would rather see resources channelled into palliative care which alleviates patients' suffering in their final days, making them comfortable. Patients can have the option to refuse treatment and let death take its course, without someone actively ending their life.</p>	Not Answered		
Disagree	<p>I think the focus should be on helping people to die well with GOOD Palliative Care.</p>	Not Answered	<p>You are asking a question that I have already said no to...I don't care where they live, I don't agree with the proposal</p>	<p>This is a stupid survey, you ask the question, do you agree with the Bill, and even though the answer is no then you continue to ask questions that are no longer relevant,</p>
Disagree		Not Answered		
Disagree	<p>Due to my strong Christian faith I do not believe that anyone other than God has the right to decide if/when someone should die.</p>	Not Answered		<p>Only to say that I strongly oppose the bill</p>

Disagree	<p>Euthanasia and assisted suicide cannot be introduced safely and to try to do so will only cause vulnerable people to doubt their worth and have concerns regarding what others may think of them.</p> <p>Vulnerable people with disabilities or terminal illnesses may then feel that the opportunity to die becomes a duty to die so that they will not be a burden to others.</p> <p>The work of suicide prevention groups would be hampered as they seek to support those with mental health conditions like depression, if assisted suicide was to become an option.</p> <p>Freedom of conscience for all medical professionals and clinics must be upheld and they should not be forced or coerced into participating in procedures with which they fundamentally disagree. They should also be protected from having to refer patients for such procedures.</p> <p>It should be noted that, on the mainland, doctors caring for the elderly and for terminally ill patients, are opposed to these proposals. The Royal College of GPS, the British Geriatrics Society and the Association for Palliative Medicine of Great Britain and Ireland are all against the legalisation of assisted suicide.</p> <p>Wherever assisted suicide or euthanasia have been introduced the initial eligibility criteria have been widened and any safeguards have been eroded. In Canada, for example, the requirement for a person’s death to be ‘reasonably foreseeable’ has already been revoked.</p>	Not Answered	
Agree		For over 5 years	
Disagree	<p>I am a Christian & believe only God should has the right over life & death issues.</p>	Not Answered	<p>The survey is biased towards assisted dying & does not give a fair voice to those against the draft Bill.</p>
Disagree		Not Answered	
Disagree		Not Answered	

Disagree	Firstly, you mean 'in principle', not principal. Surely a government consultation should use correct grammar and spelling! Secondly, may I say I do have much sympathy for terminally ill people; both my parents died from cancer. However, my reasons for stating disagree are: 1) I think it is too open to abuse, eg: people who are told they are terminally ill are, quite understandably, often not in a frame of mind to make that kind of decision, even though they would still be classed as being of 'sound mind'. They could also be pressured by others into making the wrong decision. 2) I feel doctors will be placed in difficult positions and could be pressured by some patients or their families, eg some doctors have admitted in the past they have prescribed medicines - often antibiotics - for situations where they have no effect as a result of patient pressure 3) I do not see how doctors can really know the patient is not being coerced 4) I think a doctor saying 'no' could be in an intolerable situation when the other doctor has said 'yes' and it could be even more difficult for the psychiatrist (who will know there's been a split decision) 5) I have recently heard from a friend of a person who doctors thought was terminally ill with cancer and given months to live, only to find later that the cancer had shrunk. One can see that this person might have cut short their life. I also have a friend who was told a year ago that his mother only had weeks to live and yet she is still alive 6) I do realise that other countries have assisted dying laws, though that doesn't mean it is a good idea or that the majority support it. Ultimately, even in an increasingly humanistic society, I think that it is not the place of 'man' to 'play god' in the matter of death. It seems to take us one step	Not Answered	Yes, don't provide it. Most of the questions in this consultation are irrelevant for someone, like me, who doesn't support it. My stance would be don't waste the time on this bill. It was rejected by Tynwald last time and it should not be debated again so soon. One can only think that certain persons who didn't like the outcome last time are just pushing to have their way. If only they spent half of their energy on other issues perhaps we could eradicate homelessness, improve our healthcare, sort infrastructure issues, address the cost of living crisis, achieve economic growth, etc. These are the things Government should be spending its time on!
Disagree	Amounts to assisted suicide	Not Answered	
Disagree		Not Answered	
Disagree	Family and friends discussed Convinced it is not good bring assisted dying law here or anywhere.	Not Answered	Young people will surely be confused and distressed by this law. Depression is common among us. Would anyone stop if we want to kill ourselves?
Agree	With the necessary safeguards in place. There should be a choice for people in this situation.	Not Answered	
Agree	People suffer unnecessarily with the likes of cancer and I am sure there are those out there who would prefer the option of assisted dying. There is also 'locked in syndrome' where some, again suffer needlessly. People should be given the option to make that decision when sound of mind as part of end of life care or have 'opt in' similar to donor scheme.	For over 5 years	
Disagree	I am not afraid to die , I am afraid of how I die..I want the dying person to die on his own time .God only knows when we are going to die and nobody can take life of others except God.	Not Answered	

Not Sure	Some vulnerable people may just need help to live rather than help to die	For over 5 years		I'm concerned this could be used because a person may feel they are a burden on their family and not because they really want to end their life. Or because they are not receiving the help they need to live.
Disagree		Not Answered		
Disagree	Due to my religious belief.	Not Answered		
Disagree	Palliative care is very good and no-one should feel that he is a burden to society. The way a society deals with vulnerable people is a good indication of its morality. Offering assistance to die just emphasises how much we value money over people.	Not Answered	Poor question construction	There are no safeguards in any jurisdiction that can prevent abuse. If the law stated that the relatives will not inherit anything from such a case, then some of the pressure for assisted dying may disappear. Some of the options in the questionnaire make it impossible to consistently answer the questions from a perspective of those who do not believe that assisted suicide should be allowed.
Disagree		Not Answered		
Disagree		Not Answered		
Agree	When there is already an end inniment, possibly with some restrictions and guidelines, it is respectful to the individual to let them go how they want. They will find a way regardless, this is just clean and kind.	Not Answered		
Disagree	My Dad was diagnosed with cancer when he was 60 and given a life expectancy of about 5 years. He lived for another 14 years and within that time received new treatments that were not available at the time of diagnosis. No-one can predict life expectancy. When he was terminally ill he received excellent palliative care and passed away peacefully, surrounded by his family, when the time was right. He was not a burden to us and we savoured every day with him. I am concerned about the safeguarding of vulnerable people - that over time the laws would be changed and slackened to allow more groups of people access to assisted dying. As a Christian I do not believe that assisted dying is ethical and I don't think it is right to give this responsibility to Doctors whose primary role is to preserve life.	Not Answered		There are a number of things I have concerns about: 1. A major concern is for the drugs used for these procedures being in circulation in the community if they were available for collection from a pharmacist. How would you ensure who they were actually administered to? 2. How would you actually know it was the patient's wish to die and that they were not being coerced by family members for selfish/financial reasons? 3. Medical professionals are here to preserve life, not end it - this would place a moral and ethical burden on our healthcare professionals. 4. Our Island should be known as a place of life and health not a 'suicide island'. The only being who determines when it is our time to die is God.
Disagree		Not Answered		
Disagree		Not Answered		
Disagree	I think proper palliative care is what is needed. Investment in hospice care and health visitors who help people at end of life care would mean that you don't need assisted dying.	Other		I think these questions show a bias that doesn't allow us to express our opinions.

Disagree	<p>This question misrepresents the true purpose of the bill which is to open the gates wide to assisted suicide.</p>	Other	<p>The entire line of questioning is bogus and shamelessly biased and forcing the respondent to either not ansure or accept the thesis if assisted suicide.</p>	<p>Virtually all suffering at the end of life can be managed by good palliative care. The bill if enacted will excuse the failure of health care. Relatives are already coercive with their older relatives- and such behavior will become unfettered when this form of killing is made available in the Isle of man. Many youngsters are obsessed with suicide and this bill will give them an easy way of accessing suicide with no logical way of denying their wishes to kill themselves in the face if their mental suffering. Do you really want to end up like Canada?? Life is precious and needs to be cherished. What is being considered is the ultimate slippery slope. Why not provide a consultation which is not grossly biased and manipulates the respondent. Do you think we are idiots Dr Allinson.</p>
Agree		Not Answered		<p>The person must absolutely make the decision themselves, not encouraged or advised by doctors nor forced by abusive relationships with parents, friends or partners. There should be a therapist assess this person to make sure it is 100% their own decision with no influence of anyone or anything but the medical condition.</p>
Disagree	<p>Legalising assisted dying will increase the risk of harm to vulnerable people with depression and mental health conditions. At a time when we are encouraging people to recognise these conditions and seek help more readily, introducing options such as assisted suicide seems counter-intuitive and and counter-productive; it will not help better treatments to be formulated to produce better outcomes for patients.</p> <p>The prevailing climate of greater openness and awareness and a growing understating of such conditions in our society means we should be focused ever more on providing appropriate support and treatment, not legislating for people to give up or to be coerced into ending their own lives. Allowing assisted suicide and euthanasia would add pressure to suffering individuals to end their own lives thus turning a right into a duty. This would be an appalling waste of human life.</p> <p>Doctors, nurses and other medical professionals should not be under any pressure to participate in practices such as euthanasia or assisted dying. They are trained to save life and this proposed legislation would change the nature of the doctor-patient relationship fundamentally. It would undermine professionals’ duty of care and could compromise decision-making on matter on life and death.</p>	Not Answered		
Disagree	<p>Terrible and disgusting idea</p>	Not Answered		<p>Please take this Draft Bill to the incinerator!!!!</p>

Disagree	The current state of health provision leaves me with no confidence in the governments ability to meaningfully fulfill any safeguards that the final bill might require. As such it would be grossly immoral to pass legislation allowing medical assistance in death in any capacity. Especially at this time.	Other	Have achieved full voting rights, and be meaningful members of our community. Requiring or allowing our medics to participate in the deliberate death of complete strangers would place an unreasonable mental toll, our health professionals deserve better care then this.	If the members of the house of keys are unable to safe guard the people of this isle of man, and allow a bill permitting the deliberate death of people by the healthcare system, then those people should be cared for in a properly regulated setting, with trained medical staff on site. Anything less would defacto require every member of the voting public to be complicit in manslaughter of the most vulnerable.
Disagree		Not Answered		
Agree	Providing the safeguards (as given in the above proposal) have been followed and that the individual concerned has in no way been coerced or pressed in making a decision for the benefit of any other than themselves then I think that people who are capable of making a sound and informed decision should have the right to choose for themselves to die in a dignified manner and without the associated unnecessary pain and suffering that comes with so many of these terminal conditions. Nobody should have to suffer a painful and drawn out death when with the aid of modern medicine, help can be given to make it more comfortable.	Not Answered		
Disagree		Not Answered		

Disagree	<p>Laws function to maintain a safe society, even if that means curbing autonomy on an individual basis in order to protect the most vulnerable in society. Whilst most people would support the general principle of alleviating suffering, this should not be undertaken if it has the potential to place people at risk of harm. My concerns are that I do not think the medical arguments in support of assisted suicide or euthanasia are sufficient to warrant the potential harms towards the elderly, disabled, lonely and chronically ill - all members of society who too often are made to feel like a burden. I am extremely concerned that a change in the law will exacerbate this, leading to premature death as a solution for problems that could be met with better health and social care.</p> <p>As a doctor specialising in liver disease and liver cancer, I find the arguments proposed in support of assisted suicide are often redundant. It applies to diseases where death can be anticipated, rather than emergency situations, and in my professional experience, although death may be difficult to face because it is the ultimate unknown, I have not cared for any patient who died in uncontrollable pain or suffering. Britain has led the way in palliative care, and the NHS and community palliative care teams should continue to focus on improvements with such services rather than adopting euthanasia. I feel that introducing assisted suicide will be to the detriment of other services, particularly in the current climate where economics plays a huge part in decisions about service provision. This situation has been borne out in Canada, where hospices that do not offer medically assisted dying have had their state funding removed.</p> <p>Whilst I have never seen anyone die from a chronic illness in pain and</p>	For over 5 years	Please see comments in response to Question 8.
Disagree		Not Answered	
Disagree	This bill is a real low for my beautiful island!!!!	Not Answered	I can't believe the draft bill has even been brought forward..... I really hope this inhumane bill goes straight into the bin
Disagree		Not Answered	
Agree	<p>I think people should be allowed to die with dignity at a time of their choosing. Our pets have this option with a simple lethal injection to prevent further suffering.</p> <p>If I develop dementia I will not be able to express my wish to end my life before nature decrees and I do not want to be kept alive when I have no future.</p>	For over 5 years	

Disagree	<p>No one can create life except God. He is the sole giver of life. Therefore, no man has any right to take away life, whether his/her own or another's. Assisted dying will reinforce the idea that life's value is relative. That one life may be more precious than another.</p> <p>Or that the value of a life may change depending on circumstances (age, race, health, mental capacity, material possession, rank, profession, position, etc.) when it should not!</p> <p>A life is a life is a life. It is a gift that should be cherished, preserved, and prolonged for as long as the Creator wills it to be. Let him/her who can prove that he/she is God, or equal to God, or can create life as God can, let that person be the one to decide who should die and who shouldn't. Because not even the person who desires death, let alone another, has any right to take his/her own life,</p>	Not Answered	<p>12.13.14- Age and residency are immaterial. Assisted dying should never happen in a sane, civilised society. However it's sugar-coated, it is actually killing.</p>	<p>It doesn't matter what the process is because Assisted Dying is wrong however it is delivered. It's like asking the person whom you're going to kill how he wants to die.</p>
Disagree	<p>I believe that every individual has the right to be cared of til the end of their life.</p> <p>I am a Roman Catholic, we don't agree to assisted dying as it is against our religion.</p>	For over 5 years		<p>No, just don't agree with this.</p>
Agree	<p>I think people deserve to have autonomy over their own bodies and their experiences with death.</p>	Not Answered		
Agree		Not Answered		
Disagree	<p>I fundamentally disagree with assisted dying.</p> <p>Suffering is very subjective and not inevitable. It is wrong to frighten vulnerable people by saying that they will inevitably suffer.</p> <p>The various parts of the IOM health and social care service can come together to provide excellent end of life care. Time leading up to death can be very valuable in a patient's life and for their family – a time of reconciliation.</p> <p>The key arguments against assisted dying are:</p> <p>1. The choice to die becomes an obligation to die. In Oregon, 54% of people seeking assisted death said they did not want to be a burden on their family. 2. Safeguards don't work. No jurisdiction has developed a system for assisted dying that protects vulnerable people. Every year in the British Isles, over 500,000 elderly people are psychologically, physically, sexually or financially abused, most often by family or caregivers. How do we protect them from relatives wanting a quick end or receipt of an inheritance?</p> <p>3. Danger to rights of disabled people. Assisted dying legislation erodes the idea that all lives are valuable and worth living. "I am fearful that any change to the current law prohibiting assisted suicide may adversely affect how the wider community of disabled people are treated in the future."</p> <p>Baroness Jane Campbell</p> <p>4. By moving ahead of the rest of the UK the IOM may see an influx of seriously ill patients awaiting the qualification period creating an extra workload for IOM health services</p> <p>There are also many practical difficulties-</p> <p>Terminal Illness timeline is imprecise. It is difficult to know that someone has 6 months or less to live.</p> <p>Is the request for assisted dying simply a manifestation of treatable</p>	Not Answered		<p>Please see my comments in the previous open text question.</p>

Not Sure	<p>I unequivocally support the right of every individual to receive high quality palliative care (defined by the World Health Organization as an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial, and spiritual.).</p> <p>Dignity in Dying, which campaigns for assisted dying in the UK, asserts that the majority of dying people [receiving palliative care] will have their symptoms managed; a small but significant minority of people will suffer intolerably. Because there is a consensus that high quality palliative care is effective in most cases we should seek to ensure that this care is available to every individual. Nonetheless, moving evidence presented by Dignity in Dying[iii] suggests that even if high quality palliative care is available this will not meet the needs of a very small number of residents each year. For these people it is only compassionate for the choice of hastening death to be available.</p> <p>Nonetheless there are significant concerns, evidence elsewhere shows that people who are terminally will be worried about being a burden, other countries (e.g. Canada) have expanded criteria as the practice becomes accepted, spend on palliative care is discouraged.</p>	For over 1 year		
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Disagree	<p>As Mersey NHS, I know Island has good Primary Care to enable very good Palliative Care. The BMA 2021 Conference Vote was 49% vs 48% re going neutral. The 2020 BMA Survey revealed young doctors and medical students heavily supported Assisted Dying but GPs opposed 40% vs 34%, whilst 76% of Palliative Medicine doctors opposed. Re Practising doctors prescribing the drugs it was 47% against vs 34% but for adminstering life ending drugs 56% against vs 24% ie few were prepared to do the killing. In 2020 in Oregon only 142 doctors prescribed 370 prescriptions. In the IOM popn 85,000 there will be few doctors prepared to prescribe or kill, likely to be labelled Dr Death with Mental Health consequences. The summary is of course incorrect and misleading in several aspects. The Bill proposes a requirement of onward Referral despite Conscientious Objection. This is contrary to the Policy of the UK General Medical Council and the World Medical Associations 2022 Revised International Code of Medical Ethics which also opposes Assisted Dying/Euthanasia. The Assertion re COE suggests a stance that lawmakers may be content to extend the initial legislation not least to reduce Manx HC costs despite the financial wealth within the IOM which deserves the best General and Palliative Care. The above also poses concerns re oversight re the risk of coercion to AD and extension to involuntary euthanasia in a small jurisdiction. There are many examples of harm by healthcare workers on the mainland,Harold Shipman, Victor Chua, Beverley Allitt, the Gosport War Memorial Hospital where 450 at least were prescribed Opiates inappropriately promoting death, Dr Cox injecting potassium IV and a nurse currently on trial re killing babies in Chester. Despite smaller numbers than Canada there is much concern re Oregon data on AD ie from 2020; of 370 prescriptions only 223 were taken and 67 didn't take and died later of other causes whilst another 80 were</p>	For over 5 years	<p>This Consultation is weighted towards a presumption of legislation and as such is extremely biased and gives no alternative nor explanation re many of the questions posed, in effect is a Consultation for those supporting with little opportunity for dissent. Safeguards have proven short lived and ineffective in other jurisdictions and the 2020 Oregon data shows that the option for Assisted Dying is more social and related to fear rather than pain or terminal suffering.</p>
Disagree	<p>After learning more about what impact assisted dying has had in countries such as Canada, Belgium and Netherlands on society and the drop in quality of palliative care. I am strongly against this bill.</p> <p>This bill would show no value of someone’s life and it would become expected of ill people to go down this route rather than using our world class end of life care provided by hospice.</p>	Not Answered	<p>This has not been thought through logistically with a significant lack of communication with the people this will directly affect. Showing this is a one man agenda with no thought for the welfare of our community.</p>
Disagree	<p>People will opt for this reason to fast forward things without seeking professional help.</p>	Other	<p>Assisted dying is a way too much on ending ones suffering. Life is a precious gift. Cherish it. Having lots of available support on the island that cater the needs of the people will be beneficial and should be promoted by the government.</p>

Disagree	<p>Firstly, the notion that someone being assisted to end their own life is 'dying' rather than committing suicide is transparently untrue. Many people end their own lives on learning they have been diagnosed with a terminal illness, and when they do that unassisted there is no doubt that they have committed suicide. The reason for adopting the label of 'assisted dying' is clearly one of propaganda.</p> <p>Secondly, the notion that a doctor has the capacity to assess whether a person is being in some way coerced or pressured into a decision to end their own lives is entirely unevidenced.</p> <p>Thirdly, our health service is in a dire mess. People are often receiving inadequate levels of care already, as Tynwald Members will be well aware. People who will be for assisted suicide.</p> <p>Fourthly, the notion that some studies have concluded something is absolutely inadequate in attempting to establish the facts of something as complicated as this, especially when every person who has been successfully assisted in committing suicide is, by definition, incapable of rendering a judgement as to the circumstances of their own death. We know from the experiences of survivors of suicide attempts that the thought which very often crosses their mind once they have initiated the act they believe will kill them is of regret.</p> <p>Fifthly, very civilised countries, equipped with far more lawyers and legislative drafters than us, have been unable to produce legal safeguards preventing abuses of vulnerable people, irrespective of the misleading claims made in the preface to this consultation. Persons who receive the news they are terminally ill are vulnerable by definition, especially when faced with the inadequacies of our health services. They do not cease to be so because they have some money or education.</p>	Not Answered		
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Disagree	<p>I strongly disagree that assisted dying should be permitted for terminally ill adults on the Isle of Man for many reasons.</p> <p>Firstly, I am a firm believer in the sanctity of life, and that every life is valuable regardless of whether an individual is in good health, poor health or terminally ill. On the island, we have excellent palliative care services that ensure exceptional support to the long-term sick, terminally ill, aged, disabled and the well-being of all, and those that work in this industry should be highly commended for their dedication, devotion and heart for their patients. We should be investing more in further enhancing these services and making them even more accessible, rather than trying to create opportunities for people to end their own lives! From personal experience, I know what it means to be with a loved one in their final days and, whilst it can of course be painful and heart-breaking, we can learn so much from our loved ones in those last moments. A proposal of this nature can give individuals that are considering such extreme action the impression that they are worthless and have nothing to give as they approach the end of their life, which is so far from the truth. We don't want to be creating that type of culture within our community!</p> <p>It's been refreshing to learn of the opposition to this proposal by many Isle of Man medical professionals through "Manx Duty of Care", and I stand with them in sharing their valid concerns. The introduction of such a proposal would place unfair and unnecessary pressure on our doctors in terms of their own conscience rights, judgement on diagnosing terminal illness and remaining life expectancy, and could greatly impact the relationship between our medical staff and their patients as trust that has</p>	Not Answered		<p>This question, and most of the others within this consultation makes an assumption that this draft Bill will be going ahead, and the whole process is very skewed and biased towards this notion, which is very disappointing. As a strong advocate against this proposal, I would just re-iterate the main comments that I made under Q8 - everyone's life is valuable (regardless of health condition), we need to champion our palliative care system rather than advocating suicide, we need to protect our most vulnerable, and promote life and not death.</p>
Not Sure	<p>Okay.if you are of sound mind. Worry re vulnerable people and want CAREFUL CONSIDERATION given to Safeguarding</p>	For over 1 year		
Disagree		Not Answered		
Disagree		Not Answered		
Disagree		Not Answered		
Disagree		Not Answered		

Disagree	<p>Many end-of-life caregivers have spoken against the idea of assisted suicide. They have spoken about the fear and apprehension faced by their patients; and rather than reassure them and support them, it's baffling that we're seeking to hasten them towards their deaths.</p> <p>The Hippocratic oath in its original form states that the medical practitioner must not take a life; again, many of them are opposed to this being legalised.</p> <p>I know of a young person with a life-limiting illness who leads a full working life with adequate support from services structured around them. I also know another young person with that same illness who is loves life and is cheerful, but very aware of their condition. If they had this option available to them, they'll definitely make the choice to end their life to spare those around them, rather than continue in their condition.</p> <p>I have personal experience of family who have declined further treatment at the cost of quality of their remaining days. They have passed away peacefully, in their own control. While this would be acceptable, for a doctor to actively prescribe drugs to end a life is horrifying.</p> <p>There is also the concern that very old people would feel under pressure to 'release finances' by choosing assisted suicide.</p> <p>Laws in other countries do not currently exist in the form they were brought in; the safeguards put in place have gradually been loosened to encompass an ever-widening category. Where will it stop?</p>	Other	<p>This consultation is heavily biased towards allowing assisted suicide. There is barely any attempt to collect a true representation of views, rather, sounds like a predetermined outcome trying to pass off as a consultation.</p> <p>This is an insult to the responder's opinions and intelligence; in spite of this, a response is still being recorded because of the seriousness of the question.</p>
Disagree	<p>I disagree as we can never know for sure when a person's life will end and cutting it short t avoid uncertainty is not the answer. When a terminal illness is diagnosed, the time left should be valued.</p>	Other	<p>n/a - this should not be provided as an option</p> <p>Further study needs to be done in comparison to places where similar legislation has been established, how this has impacted those killed, the vulnerable who may be guilted into taking this action despite their own wishes, and those where medical error resulted in this option being unnecessarily carried out. The effort and resources should be used in palliative care.</p>
Disagree	<p>It is immoral, unethical, slippery slope for disaster. Kids already think it's cool to kill themselves (direct feedback from teenager). We do not want or need this. We have Hospice IOM to take care of end of life as an alternative option.</p>	Not Answered	<p>Q9 - I don't agree at all</p> <p>Q10-12 - No to assisted dying</p>
Disagree	<p>I do not agree with this proposal.</p>	Not Answered	<p>All Qs - N/A</p>
Disagree	<p>I believe that God is sovereign over our lives and it rests with God alone for when a life should end. As an ex-RN I have experience of palliative care and its effectiveness.</p>	Not Answered	<p>Palliative care to control symptoms should be the ONLY way forward for all people with terminal illness.</p> <p>For answers to Qs 9-27, refer to answer to Q8.</p>

Disagree	I am gravely concerned about maintaining standards of care with this. What's to say that concrete standards will not slip/be degraded over time- especially with doctors and Manx Hospice- and even the Manx Government wanting to distance themselves from this awful bill/consultation.	Not Answered	Q9, Q12-27- Do not agree with this- No to the bill
			Q28- I am really concerned that Alex Allinson has his own agenda in order for this bill to be passed. I am also very concerned about maintaining standards and also protecting the vulnerable or elderly people and those who do not have a voice including the disabled. I am further concerned that even medics/doctors/Manx Hospice do not want to administer this. If these superb professionals want to distance themselves from this bill (together with the IOM Government) then there must be something wrong with this bill.
Disagree	Terminally ill people should be cared for no matter the cost. The Hospice provides good palliative care and support. This service should be better funded.	Not Answered	Humans are not animals, and we as humans should not be put down like an animal. There should be more dignity for human life.
Disagree	Nearly all the doctors on the island are against it. No clarity about the point of terminality.	Not Answered	Personal choice is removed.
Disagree		For over 5 years	I talked to an old lady in Peel a long time ago. She had a couple living with her who wanted her house when she passed on.
Agree		Not Answered	
Disagree	I feel this is open to abuse as I feel that assisted dying could be given to someone who doesn't really understand what they have agreed to. I feel this could open a can of worms and the vulnerable need to be protected against such abuse. This is getting rushed through and politicians are not listening to the views of the public. Drs are totally against it and no one has visited the Hospice to ask for their opinions.	Not Answered	Q12 - should be available to no-one
Disagree	This is totally not required on the IOM. 95% of Hospice staff/doctors are against it. This is to normalise suicide!	Not Answered	IOM should not become the tourist destination for 'assisted dying'! This legislation act is not !legal!
Disagree	Because nowadays there is much more effective treatments such as pain relief to help people remain more comfortable at the end of their life. I also feel it is open to abuse and there is no ethical way of doing it. Doctors have not been consulted enough and no MHK has visited Hospice to speak with doctors about how they feel. I feel this is more politically driven than it is about ethical healthcare. Also in some countries assisted suicide is legal for perfectly treatable mental health conditions. I feel once the door is open, you cannot guarantee that it won't be abused for issues such as mental health.	Not Answered	Q12 - no one
Disagree	It's unethical and dishonest. Murder by any other name.....	Not Answered	Q9-27 - N/A
Disagree	There is excellent Hospice and palliative care available on the Isle of Man. Not needed here. I haven't completed 9-27 as I don't want/agree with a bill.	Not Answered	Q9-27- N/A
Disagree	Do not agree	Not Answered	Q28- Doctors, nurses and pharmacists should be able to opt out with no requirement to send on to another professional. Q9- Do not agree Q12- N/A Q13&14- Not agree Q28- Bill should not be passed.
Agree		Other	

Agree	If this bill is passed, then the results will be very dangerous and also unethical and uncontrollable, it's an unnecessary bill as this goes on in other titles e.g. Liverpool pathway, DNR, and I believe by pushing this boundary line it will follow abortion ie: which now you can abort in lunch hour. All this bill goes against what Doctors signed for to save lives.	Not Answered	This bill is unethical, uncontrollable very dangerous and unnecessary. Doctors take oath to save not end lives. People's own choices can be flawed as they have fluctuating moods and feelings. People already request D.N.R. and this bill would follow abortions where boundary lines keep moving and countries where this bill is legal have done this pushing boundaries. I believe better end of life care and better resources should be put into palliative care.
Disagree	I am a Christian and I believe in the sanctity of life. Life should be preserved and not terminated.	Not Answered	Life must be preserved. Our healthcare staff must be seen to preserve life and not commit murder. This bill must be stopped.
Disagree	I strongly feel that if this is permitted the healthcare professionals are committing murder. Where do we draw the line?	Not Answered	This is murder. Health professionals must be jailed for murder.
Disagree	Unethical	Not Answered	This should not be passed as a bill. Suicide in any form is unethical.
Disagree		Not Answered	Assisted dying should not be proposed in the Isle of Man. As a Christian, only God has the right to take our lives.
Disagree	It's unethical, it's uncontrollable, it's unnecessary.	Not Answered	It's unethical and in my religious belief only God has the right to take or life. This bill should not be pass.
Disagree	The bill will become uncontrollable. It is unethical. It is unnecessary, dangerous. I strongly oppose it.	Not Answered	For Qs 9,12,14,15,19,20,24,25- please refer to my answer to question 8. This bill will become uncontrollable it is unethical and unnecessary. More effort should be put into palliative and end of life care.
Disagree	If passed, the bill will be uncontrollable. It is unethical. It is dangerous to all, including children and professionals. It is unnecessary.	Not Answered	The money should be going into palliative and end of life care. You shouldn't be putting the stress and pressure on the elderly who may feel like they are a burden to their family, and their family may also put pressure on an elderly relative.
Disagree	Government cannot be trusted with such power	Not Answered	Hilda Pickard
Disagree	Murder is never acceptable	Not Answered	
Disagree	Feel one should be looked after and kept free of pain as much as possible. One cannot take a life.	Not Answered	No.
Disagree	The Bible says 'THOU SHALT NOT KILL'	Not Answered	
Disagree		Not Answered	
Disagree	The law is wrong! People need support not suicide. There are enough provisions in place for palliative care and/or pain free death.	Not Answered	
Agree	Terminally ill adults should not have to suffer long lingering deaths.	For over 5 years	
Disagree	I am not answering further questions as I do not agree with assisted dying.	Not Answered	
Disagree	I believe it is wrong to take the decisions to end someone's life and that vulnerable individuals may be taken advantage of or others who feel that they are a burden to their carers may choose this path.	Not Answered	I feel strongly opposed to this Bill, having experience of working with terminally ill children. I believe that they should continue to have the opportunity of life with support from relevant agencies in order to ensure they can live as long as possible with meaningful experiences within their lifetime, however short this may be.
Disagree	I support palliative care.	Not Answered	

	Disagree	Unethical. Unnecessary. Dangerous. Uncontrollable. More resources should be put into palliative and end of life care instead of this bill. Professional and bodies that provide care are opposed to the passing of this bill.		Not Answered		
	Disagree	In the countries where assisted dying is implemented, problems and 'widening the goal posts' have occurred. I feel that palliative care on the Isle of Man should be more available. I understand that palliative care is excellent. Therefore extra government funding should be given- IMMEDIATELY		Other	10 years+	I do not wish Dr Allinson's Private Member's Bill to be introduced in Tynwald, and have given my views in Q8 with regard to assisted dying being introduced (permitted) for terminally ill adults on the I.O.M. No where in the document is there mention of the Hippocratic Oath which all medical practitioners are required to take.
	Disagree	The reading I have recently done has changed my view. What is proposed is assisted suicide which carries with it many issues. I am especially concerned to see what happened in other countries. What Government needs to do is improve healthcare and especially its funding of palliative care!		Other	Min 10 years to ensure no suicide tourism or immigration	My concerns are that: 1) This document assumes agreement when nobody has seen the draft Bill 2) The present law protects the individual and their potential vulnerability 3) "Assisted dying sounds all very neat and tidy but experience elsewhere suggests that assisted suicide legislation creates a slippery slope, despite (perhaps) best intentions to the contrary. 4) The REAL ISSUE is underfunding of health care and particularly the palliative care facilities which are provided by Hospice! 5) Security of the various drugs required- especially once they leave the pharmacy 6) Should this become law, I believe it essential that a psychiatrist is involved in determining the capacity of the patient to make an informed, non-pressured, decision.
	Agree			Not Answered		
	Disagree	Open to abuse.		Not Answered		Disagree with any process.
	Disagree			For over 5 years		There should be a plebiscite not just Tynwald voting. This is one of the most important matters ever before Tynwald!
	Disagree	I am very concerned that people may be persuaded to request assisted dying and the weak and frail may be affected most by this.		Not Answered		I disagree with assisted dying bill. It should not be allowed to happen. No to this bill. This consultation is set up to deceitfully set up to skew all the questions towards the bill being accepted. This is terrible to have allowed such a set of questions to be so biased towards the bill. Making assumptions the bill would be passed. I do not agree with this bill.
	Disagree			Not Answered		This bill should not be passed.
	Disagree			Not Answered		
	Disagree	Assisted dying should not be permitted, I am against this as it would not be long before we are entering a world where [illegible] is [illegible] and just because someone feels a person has entered their twilight years we kill them.		Not Answered		
	Disagree	Against my religion and personal.		Not Answered		I do not agree with assisted dying.

Disagree	Law would be uncontrollable in the future. Unethical - doctors conscience rights. Doctor-patient relationship. People should have access to leading palliative care instead.	Other	Over thirty years at least.	<p>I strongly disagree with assisted dying. The evidence that exists in other countries where it has been legalised goes to show how easily rules can be abused and misused without any way of controlling a downward completely unethical spiral.</p> <p>Palliative care should be available to anybody suffering with dreadful illness and pain. Governments should be ensuring that the highest quality of such care is given to alleviate suffering. There is an urgent need for an improved psychiatric facility on the island. Too many younger people are already resorting to taking their own lives here.</p> <p>In my opinion it would be a dreadful mistake to legalise assisted suicide here.</p> <p>The thought of having lethal unregulated drugs circulating in the community in the future doesn't bare thinking about as to what it could lead to.</p> <p>Nobody should be allowed to pick up such drugs from a pharmacy to keep in their own homes.</p> <p>Please no assisted suicide on the island.</p>
Disagree	The bill is unethical, dangerous, it will become uncontrollable. The bill will bring unnecessary pressure on families and the vulnerable in the IOM.	Not Answered		<p>Refer to what I said in the comment section of Q8.</p> <p>Q9, 12, 14, 15, 19, 20, 24, 25- Misleading questions. Please refer to my answer for question 8- NO ASSISTED DYING BILL IN THE ISLE OF MAN.</p> <p>The process involves stresses and [illegible] for other people (short-term and long-term) as well as for terminally ill people. It's hard to see how gradual loosening-up over time could be prevented. Better for the Island to become a centre of research and excellence for end of life care.</p> <p>Q26 - if proposal becomes law, report should include more info, not just numbers.</p> <p>Not in agreement with main proposal.</p> <p>Q12 - should not be available to anyone.</p> <p>Q15 - Certainly not. This questions is framed as though I am in favour.</p> <p>Q16 - this assumes that the entire health service agrees with euthanasia.</p> <p>Q17 - definitely not. If one doctor is unsure there should be no further referral.</p> <p>Q18 - not applicable. this implies manipulation</p> <p>Q19- if both doctors are present that infers that they are acting in collusion</p> <p>I don't agree with the concept so there will be no such process.</p>
Disagree	In this matter choice for one endangers others. E.g. there's talk already that choosing assisted dying over prolonged care allows the terminally ill elderly to be noble and loving, safeguarding family assets. That pressure doesn't even need to coerce relatives. Instead Govt. should increase funding for provision, research and training in palliative care (indv. use of medicinal cannabis) and guarantee that such care will be free of charge.	Not Answered		
Disagree	It goes against my Christian belief and morality. I strongly disagree with this bill, I do not need to answer any further questions.	Not Answered		
Disagree		Not Answered		

Disagree	*See paper written submission*	Other	I.O.M. should not become a "tourist destination for death"! The TT and the Manx Grand Prix manage this as it is.	This bill is "assisted suicide". In truth- it is a euphemism. *See paper written copy for comments*
Disagree	I do not believe that assisted dying (euthanasia) can be introduced into our society, a way that protects all members of our society, the weak the elderly and the infirm. By answering subsequent questions I would be indicating I thought it could - this is not the case.	Not Answered		<p>My deepest concern is for protection for vulnerable people. I do not believe that the protection they need can be secured by the proposals suggested 9-27.</p> <p>In the debate in the House of Lords about this issue, Caroline Spelman stated that "strong law protect vulnerable people. The existing law protects the elderly, the disabled and those who might otherwise feel pressured to die. It is difficult to prove definitively that someone has not been coerced. The right to die can so easily become a duty to die". I have personal knowledge of a friend of many years who was 'guided' to change her will in favour of a carer who had only been i her life for a couple of years. I felt it certain there had been coercion once her capacity started to decline, but there was no-one to witness it and it only became apparent once she died and the will was known. That carer benefitted greatly from the will change. It was wrong but was too late to do anything once she had died. An advocate told me at the time "you would be surprised how often this happens". I have no doubt that people would be coerced into getting out of the way if the proposed bill became law. I think it is impossible to ensure that the 'safeguards' indicated in the preceding questions can be relied upon and once a law is changed here can be no going back. In the interests of fairness and informed debate the Manx public need to become aware of all the issues in order to make a compassionate response to the invitation t make out elected representatives aware of the views of the island as a whole.</p>
Not Sure	Each person's case is unique. It is difficult to lay any dogmatic rules in every case.	Not Answered		I feel pressure being put on the patient by family members who will benefit from their deaths. Blood is not thicker than water.
Disagree	It is against my beliefs as a Christian. Life is precious and we should continue to give assistance for all to live until our lives end with love and care.	Not Answered		
Disagree	Breaching of the current legislation. Breaching of the individual human rights. Open to abuse - discrimination of the elderly, disabled, mental health issues of people, can lead to slippery slope of moving forward to allowing more vulnerable people added to list.	Not Answered		All of the questions in the consultation are leading to the outcome proposed. Does not give sufficient alternatives to disagree with proposal.
Disagree	It is a slippery slope!	Not Answered		
Disagree		Not Answered		

Disagree	The bill is: (a) unnecessary (b) dangerous (c) uncontrollable (d) unethical (e) against the wish of the professionals giving end of life care	Not Answered	Wrongly worded question that are very misleading. I am strongly against the passing of this bill for the reasons given in Question 8.
Disagree		Not Answered	Please refer to my answer to question 8 - in principal I do not agree that assisted dying should be permitted for terminally ill adults on IOM.
Disagree	It goes against my Christian belief and morality. I strongly disagree with this bill - I do not see the needs to answer any further questions.	Not Answered	
Disagree	I am totally against this proposal as it will open the floodgate - you have very good hospice on the island helping people to die with dignity, no suffering, contrary to this, dying with terrible pains after having swallowed the tablets!	Not Answered	This proposed Bill is against God's law - he gives it and takes it back, you cannot decide for yourself.
Not Answered	Of whatever religious background, the so-called "assisted dying" is deeply morally wrong. My daughter, working as a nurse in a hospice fully shares my opinion. If this bill is passed, it will without doubt open the floodgates.	Not Answered	It is not for man to play God!
Disagree	With modern medicine terminally ill patients can be helped to live a good quality of life. Assisted dying can would enable anyone who isn't dying to procure a suicide, and people who aren't dying to be coerced into dying.	Not Answered	Yes. I am completely against it.
Disagree	All terminally ill should not die.	Not Answered	
Disagree	This is not assisted dying, it is assisted suicide. It devalues life and in countries where it has been legalised an increasing number of people are being killed by assisted suicide at a level that is beyond any reasonable justification. Depression is very common and usually transitory so should not play any part in life or death. Methods are fraught with difficult and unreliable. MOST MEDICAL PROFESSIONALS OPPOSE THIS.	Not Answered	NO TO ASSISTED SUICIDE.
Disagree	Since I disagree with this proposal, I do not wish to comment on the next questions related to the proposal.	Not Answered	
Disagree	I do NOT agree with this Bill. It is pointless to answer the below questions as I am opposed to this Bill.	Not Answered	
Disagree	Because, in good faith or [unknown] conscience, I can't accept that suicide in any kind is permitted by our Almighty God.	Not Answered	I have made my choice in good faith and conscience. I believe that life belongs to Almighty God. Here I stand I can do no other. If any person may prove me wrong let him do so.
Disagree	Personal experience. Now I have survived I, and all those who cared for me in those terrible times, are so grateful it was illegal.	Not Answered	Q9- N/A. This question assumes I answered agree above. Q10- No suffering is unbearable because there is always alleviation. I know this from my own experience. Do not contact me.
Disagree	Pain management, palliative care of the island is the best I have encountered. Men/women deserve dignified natural death. This bill is not even a solution or alternative. No to ASSISTED-MURDER.	Not Answered	

Disagree	It is a slippery slope every other country who brought in this legislation have over time loosened the regulations - in my opinion and from research, specially(?) to those who work in palliative care say it is not assisted dying but assisted suicide. Also very difficult to do assisted dying - this is a very slippery slope.	Not Answered	This Bill should be going anywhere. Totally misleading questions. Totally one sided questions to get outcome.
Not Answered		Not Answered	
Disagree	Disagree. No right to interfere.	Not Answered	I think the "Good DR" needs to do a lot more RESEARCH Q9, 13, 14,15- N/A Q12- No one should have assisted dying Q15- No no no Q16, 17, 18, 19, 20, 21- I do not believe in any shape or form of assisted dying Q23, 24, 25, 26 - Not needed, not permitted. Q27- No assisted dying in any form or for any reason. Q28- Too many questions. Not right. I do not agree to assisted dying in any form.
Disagree	See email submission for more information.	Not Answered	See email submission for more information.
Disagree	I disagree with 'assisted suicide'. I agree with a person's right to refuse/decline treatment merely to keep them alive. I agree with a person receiving treatment even though that treatment may shorten their life. I agree with palliative care and to NHS and greater investment in Hospice Care and residential care. The following questions need the consideration of an Ethics Committee.	Not Answered	I don't know how you will/can incorporate all the safeguards with a weakened NHS. People have lost confidence/trust in the system, not the health professionals themselves. When is the time to process all this? I have sat beside three of my nearest family who have died, plus several residents of the residential home (I have known one person who has travelled to Switzerland. he latter was not terminally ill, but at 93 she felt her life had no value any more as she had no children or extended family on the Island.) Our concern for the former was that they died comfortably and had dignity. Valued to the end.
Disagree	It would be same as assisted suicide.	Not Answered	N/A as I have said. I do not agree with assisted dying.
Disagree	All N/A here on. Clearly not "assisted dying" but "assisted suicide". We are all of us "terminally ill" in the sense that we all shall die eventually, but artificially putting an end to a person's life means killing, which is illegal as it is unethical.	Not Answered	Too many instances where judgement has been in error, where a patient has been inappropriately deemed unable to make a sane decision, when doctors have been pressed into leaving the profession for their objections and even when pressure has been applied by persuasive 'interests'. Well just one example is TOO many.
Disagree	It is a slippery slope to pass this law. I will not answer the rest of this form as it is irrelevant.	Not Answered	I hope this will never be passed. Palliative care provided by medics is enough and assisted dying is unnecessary.
Disagree	Leaving people to make the choice for assisted dying because the state is failing to fulfil their fundamental human rights is ethically and morally wrong. Doctors should not be expected to become killers. First do no harm.	Not Answered	Separate email has been sent.
	All subsequent questions make the assumption that the respondents are in favour of the proposed Bill.		
Disagree	I disagree because it is against my beliefs and morals. It is against God's law. I DISAGREE WITH ASSISTED DYING!	Not Answered	
Disagree	I do not support any changes in the law which would permit assisted dying.	Not Answered	I do not support any changes in the law which would permit assisted dying.

Disagree	Once accepted (in principe) 'controls' - 'safeguards' are never sufficient to prevent escalation, e.g. abortion. No one should be asked (I believe) to end/help end someone's life. We should do far more to extend palliative care and to protect professionals' ability to relieve pain fully, without fear.	Not Answered		I believe we should do all we can to relieve suffering of every kind but without further undermining the value of the gift of life, which this Bill could do and I believe will do, if passed.
Disagree	Remaining questions are irrelevant	Not Answered		
Disagree	No one knows how long a person will live. It's always against the law of nature. Doctors and healthcare professionals should not be put in this situation. Doctors/psychiatrists should have seven years standing as practising professionals on the Island and not those who visit the Island for such purposes and not qualified to right standards. How is the security of poisons to be regulated. Totally against assisted dying. It's subject to abuse.	Other	Minimum 10 years	Fail to see any reason why all these questions had to be answered if against assisted dying. The questions could have been more evenly balanced. The moved of the Bill hasn't gone into full detail and only one person opinion.
Disagree	1. Life is sacred - not to be ended at human will. 2. Good end of life care is available c/o Hospice 3. The law could be abused or extended 4. Pressure on the old or vulnerable.	Not Answered		
Disagree	It goes against my Christian beliefs.	Not Answered		
	As I disagree with the Bill, I do not see the need to answer any further questions.			
Disagree	I believe that life is a precious gift of God and therefore is valuable. We live in a world of false values dictated by society and peer pressure. Human decisions can be flawed and not always trustworthy as we cannot see the outcome of the decisions we make. No-one has the right to end a person's life.	Not Answered		Q6- Manx born and bred. This proposal would be the down fall of our Island.
Disagree	We would ask you to make enquiries in countries who have legalised euthanasia, assisted suicide/dying over the last 30 years. Countries like the Netherlands, Belgium, various states in the USA, and more recently, Canada. Over the years all these countries have changed their laws to allow progressive and inclusive deaths. This now includes dementia patients, psychiatric patients, children under 18, disabled, those who do not want to be a burden on their families, those in stress through debts or just not being able to manage, or claim their pain is unbearable and need immediate help to die. So all your questions from 9 to 15 are answered by NO. If the law does not allow it nobody can carry it out, no matter how many doctors are involved.	Not Answered		Q16- Absolutely, if you do impose assisted dying/suicide on your doctors or other health professionals. So all questions 17 to 26 are only relevant if you do pass a law to legalise assisted dying/suicide. Q26- Yes- and with reasons for the deaths Q28- At this point in time we have to point out to you that you are making a law for all those living on the Isle of Man that will never return to the freedom your people enjoyed before you passed this law. Of all the countries who have legalised assisted ding/suicide, euthanasia, none have ever returned to this freedom, of not having to make the choice of assisted suicide at a very stressful period in their lives.
Disagree	I disagree to this proposal because I have done a lot of research into what is happening in other countries. It opens assisted dying to criteria being loosened. Increases risk to vulnerable adults. Monitoring of safeguards are poor. There is no mental capacity Act on the IOM. Most medical bodies are against it, including 'World Medical Association'. Psychological effects on Drs. God is the Lord of Life. Palliative care is affected and reduced.	Not Answered		N/A to all other questions Do not pursue to draft Bill.
Disagree	Where there is life, there is always hope. Humans should not interfere with nature. Our Heavenly Father decides for us.	Not Answered		

Disagree	This bill should not be considered because it is unethical, dangerous, unnecessary and will become uncontrollable in future. It cause unnecessary pressure between family members because not of them will support assisted suicide.	Not Answered		See my response and comments to Question 8 Unanswered questions- Assuming the bill is already passed
Disagree	Only GOD has the right to end a human life. I call euthanasia "killing" ...	Not Answered		
Disagree	It does not protect the sanctity of human life. In countries where it has been introduced, some of the guidelines have been stretched. It puts conscientious objectors in the medical profession in a very difficult position. More money should be put into palliative care. I disagree with this bill therefore the following questions are irrelevant to me.	Not Answered		
Agree	Yes. I have nursed two patients who died in terrible pain. I would hope that if assisted dying was available to them, they would have opted for it.	Not Answered		
Disagree	'Assisted dying' is just simply fraud with ethical, moral and practical sides. Modern technology and medicine is able to help people with illnesses, pain and traumas. A.D. can affect how disabled people would be treated by others; the value of human's life can be degraded dangerously. There are thousands cases reported and documented when terminally ill people were cured and run normal happy life.	Not Answered		I strongly disagree that assisted dying should be permitted on the Isle of Man.
Disagree		Not Answered		I fully disagree that assisted dying should be permitted on the Isle of Man!