

Assisted Dying Bill

House of Lords, second reading
Friday 22 October

About the BMA

The BMA (British Medical Association) is a professional association and trade union representing and negotiating on behalf of all doctors and medical students in the UK. It is a leading voice advocating for outstanding health care and a healthy population. It is an association providing members with excellent individual services and support throughout their lives.

Key points

Policy position: The BMA represents doctors and medical students from across the UK who hold a wide range of views on physician-assisted dying. In September 2021, the BMA's annual policy-making conference (the Annual Representative Meeting (ARM)) [voted to adopt a neutral position](#) on whether the law should be changed to permit physician-assisted dying; this means that the BMA neither supports nor opposes a change in the law.

Member survey: In October 2020, the [BMA published the results of an all-member survey on physician-assisted dying](#).¹ This piece of member research is one of the largest surveys of medical professional opinion on physician-assisted dying ever conducted and provided invaluable insights into our wider membership's views on the matter. It was one of a number of factors that informed the policy-making vote at this year's ARM.

BMA policy position

In September 2021, our representative body voted to change the BMA's policy on assisted dying. **The BMA is now neutral on whether the law on assisted dying should change** (including assisted dying with involvement from doctors). This means that we will neither support nor oppose attempts to change the law on assisted dying in the UK.

Although our neutral position means that we will not comment on the fundamental question of whether the law should change, we will represent our members' interests and concerns when considering mechanisms and provisions in legislative proposals that would have a significant impact on doctors if a change in the law were to arise.

One such provision is conscientious objection. The BMA has clear policy that **there must be robust protection for conscientious objection** written into any legislative proposal on assisted dying. Crucially, the right of conscientious objection should apply to all health, care, and administrative staff. In the event of a change in the law, we would expect that clinicians would provide factual reports to a decision-making body tasked with assessing eligibility or other legal requirements (if appropriate and relevant). They must, however, have the right to conscientiously object to prescribing life-ending medications. Beyond this, there will need to be

¹ The survey was conducted on our behalf by Kantar, an independent research organisation. The results of our survey can be viewed here: www.bma.org.uk/advice-and-support/ethics/end-of-life/physician-assisted-dying/physician-assisted-dying-survey



careful consideration of the scope and specifics of clinician involvement to ensure that doctors' rights to conscientious objection are protected.

Wider BMA work

Beyond the BMA's established policy, as outlined above, we have also conducted two pieces of work in recent years that were aimed at exploring our members' views on some aspects of physician-assisted dying:

- (1) our all-member survey (2020); and
- (2) our ELCPAD (end-of-life care and physician-assisted dying) dialogue events with doctors and members of the public (2015).

All-member survey (2020)

We were clear throughout the process of [surveying our members' views on physician-assisted dying](#) that the survey would not form policy. Rather, it was intended to help inform our future discussions, including (but not limited to) the policy-making debate at the 2021 ARM at which the Association voted for a position of neutrality regarding a change in the law.

The survey was divided into three sections, asking questions about:

1. doctors **prescribing** drugs to eligible patients for self-administration;
2. doctors **administering** drugs to eligible patients with the intention of ending their lives; and
3. how the BMA should respond in the event of future proposals to change the law.

Through one of the largest surveys of medical opinion that has ever been conducted, 28,986 of our members provided invaluable insights into our wider membership's perspective on physician-assisted dying. A breakdown of the results, including by region and speciality, is available in the [full findings on the BMA's website](#).

End-of-Life care and Physician-Assisted Dying project (2015)

Part three of our all-member survey was a continuation of the smaller scale discussion we started with our members via our ELCPAD (End of Life Care and Physician-assisted Dying) project in 2015. Through a series of dialogue events across the UK, the sessions explored, amongst other issues, the impact on the doctor-patient relationship if physician-assisted dying were to be legalised, and the public's and doctors' views on different options for deciding an individual's eligibility for physician-assisted dying if the law were to change. More information about the views we heard is [available on the BMA website](#).

For more information about the BMA's position of neutrality on physician-assisted dying, the findings from our 2020 all-member survey and our 2015 ELCPAD project, please visit our website: www.bma.org.uk/PAD

This web hub also contains a **range of publicly accessible briefing materials** we have developed for our members, including:

- Information about the law in the UK and how it was developed
- An overview of the law in jurisdictions internationally where physician-assisted dying is permitted
- An overview of recent surveys of medical and public opinion on physician-assisted dying