WE ALL HAVE A CHOICE ABOUT HOW WE LIVE OUR LIVES. WE SHOULD ALSO HAVE A CHOICE ABOUT HOW WE DIE.

SARA CUTTING
2016 has been a landmark year globally for choice at the end of life. In November, Colorado became the sixth US state to legalise assisted dying, with 57 million Americans now living in states with assisted dying laws. Progress is also being made in New Jersey, Washington DC, South Africa and Australia, reflecting the fortitude of the campaign movements in those countries. Read about these developments on page 13.

Here, our local campaign groups continue to expand and with the support of committed and persistent campaigners like you, the foundations for change continue to strengthen. Our campaign groups now cover 100 constituencies of
strategic importance, with new groups coming in 2017, which you can read about on page 8.

Dignity in Dying members are the strongest voices advocating for change on assisted dying, which is why we’re asking you to help spread the word. By speaking with anyone you think may be interested to learn more about the campaign you can help us grow our movement. Please turn to page 18 to find out how you can help.

While religious leaders remain a powerful force against assisted dying, they do not represent the 79% of religious people who support a change in the law on assisted dying. On his 85th birthday, Archbishop Desmond Tutu appeared in a video stating publicly for the first time that he would want the option of assisted dying for himself. He called on “politicians, lawmakers and religious leaders to have the courage to support the choices terminally ill citizens make”. Rabbi Dr Jonathan Romain describes this as causing “an earthquake” in the religious world on page 6.

This October Sara Cutting made a video explaining her reasons for supporting a change in the law following her experience of cancer. Sara’s determination to live her life to the full is inspirational. I’m sure her determination will be an asset to the campaign. You can read a message from Sara on page 4.

Dignity in Dying’s sister charity Compassion in Dying explores the perspective of two contrasting cases of advance care planning. The tragic case of Steve Briggs is discussed on page 16. Lindsey Briggs, the wife of a former police officer and war veteran who is now in a coma following a motorcycle accident, is asking the courts to let him die. Sharon Morgan, who worked as a coordinator on the My Life, My Decision project, explains how her mother’s Advance Decision allowed her family to navigate a difficult time with clarity and confidence on page 18.

In 2017 we will continue to challenge the groups like the British Medical Association who undemocratically oppose assisted dying. We will continue to strengthen our campaign networks and expose the true costs of Parliament’s failure on assisted dying and, very soon, we will directly challenge the current law through the Courts. A constant amongst all allies working to change the law, whether here or overseas, is our determination. With your support, together, we will succeed.

Sara Cutting
I AM NOT SCARED OF DEATH, BUT I SHOULD HAVE A CHOICE.  

BY SARA CUTTING

Sara Cutting has recently started campaigning on behalf of Dignity in Dying, and released a video giving her reasons for supporting a change in the law on assisted dying in October.

In July 2014, I was diagnosed with an aggressive form of breast cancer. A few weeks after I received the big C news, I was booked in for surgery.

It wasn’t until I left my partner at the operating theatre doors, that it dawned on me what was happening.

Post-surgery I was unwell and in pain. I soon discovered that I have an intolerance to opiates – the main form of pain relief for cancer patients. The awful side effects I experienced got me thinking about how I would cope if my cancer treatment was unsuccessful. What if my diagnosis became terminal? How would I cope with the pain? I am not scared of the moment of death; I am scared of what I may experience en route.

Later that year, when I was to start intensive chemotherapy, I knew I was going to lose my hair. Ironically, this scared me more than dying. In a moment of madness, I decided to get half my hair shaved off and I immediately felt better. I was going to control this “Diva” called cancer, not the other way around.
It was in the following hours that I thought, I’m going to make some good out of this crappy situation, and the Daily Different Headgear Challenge was born. I put something on my head each day of my treatment and posted a selfie on social media, asking people to donate to Macmillan Cancer Support.

Macmillan has been by my side since my diagnosis. They have listened to my fears and worries, given me advice on what benefits I was entitled to and been there for me post-treatment, which has been the loneliest and darkest of times. I felt compelled to raise funds for them, whilst encouraging people to be body aware with the hashtag #NowGoCheckYourBits.

The challenge has helped me focus on the day in hand, and not speculate endlessly on what the future may hold. It has also given me a sense of humour around what has been and continues to be the hardest experience of my life.

Whilst I didn’t want to dwell on the future, I couldn’t ignore it. Over the past few years I’ve had to face the prospect that I may not survive, that the cancer may kill me. If I were given a terminal diagnosis, I would want to live my life to the full right until the very end. With my intolerance to opiates, I’m nervous that my pain management could be compromised. I don’t want to struggle through my final days in pain.

Because of this I am campaigning with Dignity in Dying to get the law changed on assisted dying for the terminally ill. I have known people who had to travel overseas to die. They were forced to die sooner than they would have done if assisted dying were legal here. They didn’t get the chance to live their lives to the full because they had to go before they would have wanted. Moreover, they had to travel hundreds of miles from home and spend thousands of pounds so they could die in a peaceful, pain-free, dignified way. To me this feels inhumane and so very cruel.

We need to start talking about the elephant in the room – about how we wish to die. Often we are powerless to stop illness taking our lives away from us, but we can take control of our deaths. We need our voices to be heard: if we want the choice to die with dignity, at a time that is right for us, we have to fight for it. It is not defeatist to want to have a comfortable, controlled death, nor is it contradictory to fight for the best care and choice at the end of our lives. Let’s take the taboo away, get talking and get the law changed.

We all have a choice about how we live our lives. We should also have a choice about how we die.

Sara has made a video to support the campaign which you can watch online: www.bit.ly/saracutting
An earthquake has occurred in the religious world, the effect of which may well be long-lasting and help change the law in Britain.

It concerns the issue of assisted dying – the ability of people who are terminally ill and who wish to avoid pain or indignity by choosing when to die.

At present it is illegal in this country, but British citizens can travel to Switzerland to die abroad because they cannot do so at home.

One of the obstacles to changing the law to permit assisted dying here has been the fierce opposition of religious bodies, with the Archbishop of Canterbury, Catholic Cardinal and Chief Rabbi all condemning it as against the principle of the sanctity of life. This is certainly a view sincerely held by those concerned, but they have been mischievous as presenting it as the definitive religious view and assuming they have a monopoly on morality.

There are many of faith, including clergy, who value life just as much,
but who see no sanctity in suffering and nothing holy about agony. It is a travesty of religious principles to force the terminally ill to live on against their will and to make them die in pain because of someone else’s theological convictions.

This supposedly monolithic religious opposition has now felt the tremors of the earthquake. It has come in the form of a video released by Archbishop Emeritus Desmond Tutu. He states not only that he supports the right of individuals to an assisted death, but also that he wants the option of assisted dying for himself.

Archbishop Tutu recently turned 85 and has had prostate cancer. In the video he declares: “As a Christian, I believe in the sanctity of life … and that death is a part of life. I hope that when the time comes, I am treated with compassion and allowed to pass on to the next phase of life’s journey in the manner of my choice.”

Bearing in mind that Archbishop Tutu is one of the most respected religious figures in the world his endorsement is significant and will help to pierce the myth that being religious means being against assisted dying.

It will also chime with the public mood. In April last year, Populus conducted the largest ever poll on assisted dying, which found that 82 per cent of the public support a change in the law.

The poll also analysed support by religion and found that support was just as high among those who were religious, with 80 per cent of Christians, 83 per cent of Jews and 91 per cent of Hindus in favour. Support was lower among Muslims at 38 per cent, while 50 per cent of Sikhs were in favour.

It signals that, as was the case with women’s ordination and gay rights, the religious hierarchy is not only out of step with the public at large, but also with its own members and even with a growing number of their own ministers. While this has long been suspected, Archbishop Tutu’s declaration has highlighted the dissension within the highest echelons.

For many people of faith, caring for the lives of others is the litmus test of their creed. It is now evident that this is extending to the way individuals end their life, including the right to die as well as possible and in the way one wishes.
From Leeds to Cornwall, from Islington to the Isle of Wight, from Devon to Liverpool, new groups of local campaigners are springing up across the country. Over the past few months, I’ve had the pleasure of meeting hundreds of passionate, enthusiastic individuals who want to help Dignity in Dying spread the word of the campaign for assisted dying in their communities.

Our 18 (and counting!) local campaign groups help us to raise public awareness of assisted dying and put pressure on MPs in more than 100 parliamentary constituencies across the UK. Over the next year, we plan to expand the network to 40 groups of local campaigners, enabling us to reach the 200 targeted constituencies necessary to swing a future parliamentary vote on assisted dying.

Launching new groups has been a really exciting process, starting with an initial public meeting, with some drawing in over 40 people. The launches help to bring interested people together, ensuring that everyone is informed about the campaign and opening up the discussion for ideas for campaigning locally.
Each one has generated new and different ideas, as local people know what will work best in their communities. We don’t take a one size fits all approach to local campaigning, with no set number of meetings or actions, but instead we work together and support each group to confidently spread the message. I’ve been struck by the range of different skills and networks our local campaigners have – they are a very talented bunch!

WHAT HAVE NEW GROUPS BEEN UP TO SINCE LAUNCHING?
The answer is lots! The Isle of Wight, Cornwall and Portsmouth groups have already got coverage in their local press, a great way to promote awareness. Groups from Exeter and Leeds have held information stalls at community events, which are a brilliant way to speak to local people, hand out leaflets and have a presence in the community. Several groups have set up Facebook groups, enabling them to spread the word through family and friends online. Many groups have arranged follow up meetings and are planning speaking engagements, petitions, film screenings and discussion events.

Those groups who’ve been around a while longer are going from strength to strength, with discussion events held this past month in Oxford and Cambridge, members from Cardiff and Yorkshire speaking in debates and talks, and members from Bath and Bristol and Eastbourne groups meeting with their MPs to continue to persuade them to support a change in the law.

WHAT HAVE WE GOT PLANNED FOR LOCAL GROUPS?
We are very excited to be developing new tools, resources and training to support local campaigners. Each campaign group will have their own dedicated page on our website, with details of how to get in touch, upcoming events and an online local petition. They’ll also be receiving a campaigner’s toolkit full of template letters, speaking presentations and guides on how to get started. In the new year we’re offering a day’s training to local campaigners to further develop key skills and confidence in campaigning.

GET INVOLVED TODAY
Does local campaigning sound up your street? Have some ideas for spreading the campaign message? Then join the movement today!
To find out more get in touch by emailing activism@dignityindying.org.uk and find out if there is a local group in your area,

We’re particularly looking for anyone interested in helping to set up new groups in the West Midlands, East Midlands and the North West. No prior campaigning experience is necessary and there is no set time commitment.
THE NEW DIGNITY IN DYING WEBSITE.

For the past year we’ve been working hard to build a new website for the campaign and finally we’re able to share something with you.

We are a very different organisation today than we were when we built our former website, we’re now able to reach more people than ever and we need to have an online presence to match. Our previous website simply wasn’t up to the job of supporting you to campaign effectively.

A large portion of the project has been spent thinking about what the website needs to achieve and we concluded that it needed to inform and educate, but most importantly, inspire people to take action.

We’ve tried to make it as easy as possible to get involved in local campaigning. You’ll hopefully notice that you can now enter your postcode and find out if there’s a campaign group near to where you live. If there isn’t, you can register your interest in setting one up near you. Each local group will have their own dedicated page on the website where you can see how your MP voted on assisted dying. You’ll also have access to handy guides and toolkits to help you actively campaign in your area.

It’s been a long project but knowing that we have thousands of supporters ready to get campaigning has kept us all motivated.

Please take a look and let us know what you think!

www.dignityindying.org.uk

IN MEMORY OF ROSEMARY “ROMEY” BROWN OBE.
Dignity in Dying Patron Romey Brown sadly died in March of this year.

Romey was a supporter and campaigner alongside her husband Peter Brown for over 20 years. They have been inveterate networkers on our behalf, and Romey was a Patron for several years.

Romey firmly believed that the law on assisted dying needed to change, and her passion for this, and commitment to the campaign were inspirational. Peter Brown remains a staunch supporter and Patron of Dignity in Dying.
In October, Dignity in Dying member Mick Murray and our Research and Policy Officer Lloyd Riley were guests on Scroobius Pip’s podcast, Distraction Pieces. Pip, a spoken word poet, hip-hop artist and actor, hosts a weekly podcast in which he interviews comedians, actors, musicians, DJs and occasionally people working for causes he believes in.

In the podcast, Mick talked about his journey to Dignitas to help his friend Bob Cole be assisted to die. Since Bob in died in August 2015 over 50 people have travelled to Dignitas from this country. Mick, Lloyd and Pip discussed why Parliament thinks this status quo is acceptable, why some people in the medical professions are still opposed to assisted dying and what people can do to get involved in the campaign and help change the law.

Pip is a supporter of greater choice at the end of life and we’d like to thank him for taking an interest in Dignity in Dying and Compassion in Dying.


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**IN MEMORY OF STEVE BARKSBY.**

We are sad to announce that Steve Barksby, a long-time campaigner for Dignity in Dying, died earlier this year.

Steve became a member in 1995 and was one of five members who delivered a petition to Downing Street shortly after the death of Diane Pretty in 2002. Steve campaigned tirelessly, sharing his story in the media, particularly in the Manchester area, speaking at school and university debates and meeting MPs and MEPs in order to raise awareness of the need for change on assisted dying.

In addition to his campaigning for an assisted dying law, for many years Steve edited ‘Alive and Kicking’, a newsletter offering information and advice to people affected by HIV, and he campaigned on a variety of issues including welfare rights around access to benefits.

Steve made a huge contribution to the campaign over the course of 20 years and he will be sorely missed.
As usual, Dignity in Dying hosted fringe events at party conferences in the autumn. We’d particularly like to thank Dr Jacky Davis and patrons Andy and Peter Squires for speaking on our panels at the Labour conference in Liverpool and the Conservative conference in Birmingham.

The discussion at the Conservative Party Conference in particular was a fascinating one, featuring important contributions from Times columnist and Conservative Peer Lord Finkelstein and former Deputy Mayor of London Kit Malthouse MP.

Introducing the discussion, Lord Finkelstein declared assisted dying to be “the building liberal cause of the future”.

“The support we had last year [for the Assisted Dying Bill] shows how much opinion has shifted on the issue, but in the House of Commons politicians have proven themselves to be behind political opinion.”

“Politicians need to grasp that they are running behind a debate that most ordinary people think is obvious.”

The panel discussed whether MPs needed to be faced with the consequences of inaction. Many MPs had not seen the realities that the current law forced upon dying people, both those who had suffered a terrible death and those who had travelled overseas to die.

In addition, MPs needed to see assisted dying not as an alternative to good end-of-life care but as part of the range of choices that a dying person should have available to them.

Unfortunately even with the best palliative and end-of-life care, some people will die badly. A lack of honest conversations can make this even worse. Sarah Wootton, Chief Executive, said that depriving patients and families of this conversation was to deny them “a great source of comfort”.

Kit Malthouse complained that the ban on assisted dying did not make sense: “Like most laws that contravene essential human rights, it’s idiotic, and 82% of the population find it idiotic, same as denying the vote to women was idiotic”, he said. “These laws that contravene things that we intrinsically know are human rights, but for which we deny for intellectual constructs – medical or religious – they always fall in the end.”
INTERNATIONAL DEVELOPMENTS.

BY LLOYD RILEY

USA
Colorado
Amongst the frenzied coverage of the US Presidential election result came the news that Colorado became the 6th state in the USA to legalise assisted dying for terminally ill, mentally competent adults. Voters in Colorado overwhelmingly backed a change in the law, by 65% to 35%, despite a well-funded campaign from those opposed to the law. 57 million Americans now live in States with legalised assisted dying. We expect this figure to rise in 2017.

Washington, DC
In November the Council of the District of Colombia voted 11 to 2 in favour of legalising assisted dying. At the time of writing the Bill had passed another vote in the Council, and now needs to be approved by the Mayor before becoming law.

New Jersey
The New Jersey Senate Health Committee has approved an assisted dying Bill by 5 votes to 3. The State Assembly has already given its support for the Bill, which means that if the full Senate votes in favour it will become law, unless the Governor of New Jersey, Chris Christie, vetoes it.

AUSTRALIA
A parliamentary committee in the Australian State of Victoria has recommended the law be changed to allow terminally ill people to ask a doctor to assist them to end their lives. The committee made 49 recommendations relating to improving end-of-life care, advance care planning and the introduction of a legal framework for assisted dying. The Victorian government has 6 months to respond to the report.

In South Australia an assisted dying bill was defeated in the House of Assembly. Despite succeeding at second reading, the third reading vote resulted in a tie, with 23 MPs each supporting and opposing the measure. The bill was defeated by a casting vote from the Speaker, although the success of the bill at second reading is an excellent sign of progress.

SOUTH AFRICA
The South African government is appealing a ruling made by the country’s Supreme Court. In 2015 a judge ruled that a terminally ill man did have the right to be assisted to die by his doctor. If the ruling is upheld then the government will face increasing pressure to introduce assisted dying legislation.
My Mom became aware of her right to complete an Advance Decision to Refuse Treatment through my work as coordinator of the My Life My Decision service. Although her path to planning ahead came from my professional involvement with the project, the outcome of this knowledge for us as a family, and me on a personal level, allowed us to navigate a particularly difficult time with direction and certainty.

Mom was a strong and resourceful person, creative and caring. She was not afraid to look life straight in the eye and deal with whatever came her way, grasping opportunities and chances when they presented themselves. She lived her life fully. Poise, strength and independence are the three words I would use to sum her up.

The past few years had taken their toll on my Mom. She suffered with Meniere Syndrome for a long time but lately her Osteoporosis and chronic obstructive pulmonary disease (COPD) created new challenges. Her world became smaller, limited to the flat she shared with my step-dad. Her energy levels inhibited her ability to paint, a pastime and talent that gave her
solace and an outlet for expressing herself. She became constrained to four walls, reliant on her family to bring as much of the world to her as we could. Being dependent on others and restricted in her movement was like a prison for my Mom.

Last summer, Mom decided that she needed to take control of her future, she completed her Advance Decision. She refused all life sustaining treatment in the event that she lost the ability to make that decision herself. In December, she was admitted to hospital with a suspected chest infection. She made sure the staff knew about her Advance Decision. One medic said to her that she was brave to have committed her wishes to paper. She said no it wasn’t brave, “it’s brave not to have one”.

Over the next few months, Mom was in and out of hospital, receiving blood transfusions, antibiotics and oxygen therapy. She still had capacity and knew that there was something more serious than an infection, something that she would not overcome this time. Finally a definitive diagnosis was given – myeloid leukaemia.

On Friday 4th March, Mom and I trekked up to the hospital for her to have another blood transfusion. On Saturday, at home, she was finding it increasingly difficult to breathe; she could feel the use of her muscles diminishing and was quite anxious. She knew that she was going to become more reliant on carers and didn’t like the thought of strangers having to go through her drawers and of not having control of herself. I asked if she wanted to ring an ambulance or go to the hospital but she didn’t reply. So I didn’t. Because we had had the conversation, I knew she didn’t want that.

I sat with Mom that night. She ate a bit of fish and chips and had some lemon pudding – more for my benefit than hers I’m sure. I helped her get ready for bed, held her hand and read to her. She was a lot calmer and seemed more settled than when I arrived.

My Mom died in her sleep that night, the eve of Mothering Sunday. Although I grieve the loss of my mom I can say that she followed the path in her own way, in control of it and with dignity. She was in her own room with familiar surroundings and the man she loved close to her. And because we had had the discussions and she had made her wishes quite clear, it was easier for us as her family to support her through it.

It is never easy to lose the people we care about and talking about it can be distressing. But I can’t imagine having to make those difficult decisions without having had the discussions beforehand. I knew what Mom’s wishes were and her thoughts on quality of life. She directed her own path, just the way she had done all her life.
In July 2015 Paul Briggs suffered a brain injury in a crash while he was working at Merseyside Police. Paul, a 43-year-old husband, father, policeman and former soldier nearly died, and has been unconscious ever since.

At the time of writing, 18 months later, Paul’s treatment is being considered by the Court of Protection. His wife Lindsey believes treatment should be stopped based on Paul’s previously expressed wishes, but doctors treating him want a “further period of rehabilitation”.

This is a tragic case. Paul’s accident was caused by a member of the public driving dangerously leading to head-on collision with his motorbike (she has since been convicted).

Although Paul and Lindsey had discussed what they would want to happen if anything were to go wrong, they had never put their wishes in writing in a legally binding Advance Decision.

The law says that if there is no Advance Decision, or Lasting Power of Attorney for Health and Welfare (a trusted person nominated to make treatment decisions), then doctors decide what treatment is in a patient’s best interests. As Paul had not made an Advance Decision expressing his wish to refuse life-sustaining treatment in this situation, and his family and doctors disagree about what would be best for him, the case must go to court to be decided.

Writing about her experiences in the Daily Mirror earlier this year, Lindsey explained that she is now making an Advance Decision so that if something similar happened to her, her and Paul’s daughter Ella would not be put in the position she is now in. She said:

“I can’t stress enough that other couples should do the same. You might have told loved ones your wishes but it means nothing unless you write it down.

“I love my husband but he is dead in all but his body. I don’t know when I will ever lay him to rest in peace. That’s a limbo no one should be in.”

If you would like to make an Advance Decision or for more information on how you can ensure your wishes are known and respected by doctors, contact Compassion in Dying on: 0800 999 2434 or www.mydecisions.org.uk.
MY LEGACY AND DIGNITY IN DYING.

BY RACHEL WILKINSON

I support Dignity in Dying because it baffles me that it’s okay in our country for people to suffer at the end of life. Unfortunately, I’ve seen people suffering towards the end of life, and I don’t think anyone would wish that for themselves or for anyone they love.

I think it’s important that in a safe way we’re given an option to say ‘thank you very much but I don’t want to suffer any more’. I think the work that Dignity in Dying does is amazing, to move towards a change in the law, so anything I can do to help continue that and to continue raising awareness is very important to me.

One way I’ve chosen to help Dignity in Dying is leave them a legacy. My husband David was a soldier, he was killed nine years ago out in Afghanistan. Most of the money I have is through him dying and the insurance he had. When I die, I want the money to make a difference, because he made a difference during his life.

I decided the best way I could make a difference is through donations in my Will. I thought for a long time about what organisations were important, and eventually chose two causes that David supported and two that I support. My choices were Dignity in Dying and my local hospice who I have a close association with. It was important to me that people knew about it, so I shared on social media that I’d prepared my Will, and included four charities and non-profits as residual beneficiaries.

I ordered a Free Wills Pack through Dignity in Dying, and found the process of creating a Will incredibly easy. It’s very reassuring to know that it’s prepared. None of us know what’s round the corner, but I’m confident because my executors, who happen to be my best friends, all have a copy and know my wishes. They know my passion for Dignity in Dying and the other three organisations. I have that peace of mind that if anything did go wrong, everything is settled.

To learn more about leaving a legacy to Dignity in Dying, and preparing your Will for free please contact us:

Tel 0207 479 7730
Email info@dignityindying.org.uk
Please help the campaign for assisted dying by speaking with your friends and family about Dignity in Dying, and encouraging them to find out more. Talking about the importance of a change in the law is vital. Parliament needs to recognise that by failing to act they are overruling the views of the British public and ignoring unnecessary suffering at the end of life. By having conversations we can raise awareness and ensure that the facts prevail in the dialogue that surrounds assisted dying.

By encouraging your friends and family to learn more about Dignity in Dying, you are helping the campaign immeasurably. The more members we have, the stronger our voice becomes. Increasing our membership is vital, as it means that there will be more people prepared to write to their MP and other important figures, more people interested in joining their local activist group, and more people calling for a change in the law.

**KEY FACTS:**

- **82% of the public support assisted dying**
  - 82% of the public are in favour of assisted dying for terminally ill, mentally competent adults. This includes 79% of religious people and 86% of disabled people.

- **Vulnerable people would be protected by an assisted dying law**
  - Assisted dying happens unregulated, behind closed doors already, and the
current law contains no safeguards to protect vulnerable people. Every two weeks someone from Britain travels abroad to die whilst ten more terminally ill people end their own lives at home. Around 1,000 lives a year are ended by doctors illegally at the patient’s request. The current law is failing – upfront safeguards outlined clearly in legislation are desperately needed.

ASSISTED DYING IS A TIME TESTED MEASURE
Assisted dying has been legal for dying adults in Oregon since 1997. There have been no cases of abuse in Oregon and no extension of the law beyond its initial scope. Experience in Oregon proves that there is a safe, viable fix to the failings of our current law.

ASSISTED DYING CAN WORK HAND IN HAND WITH GOOD END-OF-LIFE CARE
There is no evidence that assisted dying would negatively impact end-of-life care. Oregon, Washington and Vermont, which all have assisted dying laws, are amongst the top eight performing states in the USA in terms of access to end-of-life care. Lack of care is not a reason for choosing assisted dying - over 90% of people who have an assisted death in Oregon are enrolled in hospice care.

For source information and more useful facts please see our publication Setting the Record Straight http://bit.ly/2g8AhCM

ALASTAIR GORDON: WHY I SPREAD THE WORD ABOUT DIGNITY IN DYING
I have been a member of Dignity in Dying for several years and contribute more than the standard membership fee to this worthy cause as well as leaving something in my will. This is because I feel that having an assisted death when terminally ill and suffering should be a basic human right.

A change in the law is long overdue and widely desired. There can be no doubt that change will come here in the end. The subject of assisted deaths and the need for a change in the law comes up frequently when I meet old friends or new people, often initiated by me. I am sure that at least a dozen people have become members of Dignity in Dying through me and there are many more who I have had information sent to. Spreading the word in this way is an important part of being a member and is something I find very fulfilling.

BY INCREASING OUR MEMBERSHIP OUR CAMPAIGN WILL GROW IN STRENGTH. PLEASE GIVE YOUR POSTCARDS TO ANYONE YOU THINK MAY BE INTERESTED TO LEARN MORE.
TOGETHER WE CAN CHANGE THE LAW.