

November 2024

# Proceeding with Caution

## Britons' Views on Assisted Dying



**More in  
Common**

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## About More in Common

More in Common is a think tank and research agency working to bridge the gap between policy makers and the public and helping people in Westminster to understand those voters who feel ignored or overlooked by those in power. Our British Seven segmentation provides a unique lens at understanding what the public think and why. We've published groundbreaking reports on a range of issues from climate and refugees to culture wars to crime. We are a full-service research agency offering polling and focus group research and are members of the British Polling Council.

This research was conducted in Autumn 2024. Full methodological information can be found at the end of the report.

## About the British Seven segments

This report uses our [British Seven](#) segmentation to categorise participants. This is a psychographic, values-based segmentation of the British public which in many cases is more predictive of beliefs on certain issues than other demographics. The seven segments are:

**Progressive Activists:** A passionate and vocal group for whom politics is at the core of their identity, and who seek to correct the historic marginalisation of groups based on their race, gender, sexuality, wealth, and other forms of privilege. They are politically engaged, critical, opinionated, frustrated, cosmopolitan, and environmentally conscious.

**Civic Pragmatists:** A group that cares about others, at home or abroad, and who are turned off by the divisiveness of politics. They are charitable, concerned, exhausted, community-minded, open to compromise, and socially liberal.

**Disengaged Battlers:** A group that feels that they are just keeping their heads above water, and who blame the system for its unfairness. They are tolerant, insecure, disillusioned, disconnected, overlooked, and socially liberal.

**Established Liberals:** A group that has done well and means well towards others, but also sees a lot of good in the status quo. They are comfortable, privileged, cosmopolitan, trusting, confident, and pro-market.

**Loyal Nationals:** A group that is anxious about the threats facing Britain and facing themselves. They are proud, patriotic, tribal, protective, threatened, aggrieved, and frustrated about the gap between the haves and the have-nots.

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**Disengaged Traditionalists:** A group that values a well-ordered society, takes pride in hard work, and wants strong leadership that keeps people in line. They are self-reliant, ordered, patriotic, tough-minded, suspicious, and disconnected.

**Backbone Conservatives:** A group who are proud of their country, optimistic about Britain's future and who follow the news, mostly via traditional media sources. They are nostalgic, patriotic, proud, secure, confident, and engaged with politics.

More information about the segments can be found at  
<https://www.britainschoice.uk/segments/>

## Foreword

Debates about life, death and the role of the state in questions of personal autonomy are necessarily emotive and passionate, they also rarely lend themselves to clean, black and white conclusions. One such debate concerns what it means to have a 'good death' and specifically whether or not those who are terminally ill and/or in chronic pain should be able to seek and receive medical help to end their own lives - what is known as assisted dying.

Supporters of assisted dying believe that the central issues in this debate are those of autonomy and compassion. The most common argument Britons cite in favour of assisted dying is that it is fundamentally wrong that people who are in pain or suffering should not be able to choose the option of a dignified death on their own terms. They point to the unsatisfactory nature of the status quo that enables those with the means to travel to Switzerland, often ending their own lives sooner than they otherwise would. Others have suggested that the current legal framework leads to the worst of both worlds - whereby grieving families of those who choose to end their life are subject to lengthy investigation, but that investigation and assessment of coercion and pressure only happens after someone has died.

Opponents of assisted dying, while often sympathetic to those who are in pain or suffering, recoil from the idea that the state should be involved in ending life. They argue that no safeguards to prevent vulnerable people from feeling pressured - either directly or indirectly - into seeking assisted dying can be wholly foolproof. Opponents of assisted dying will often highlight that our understanding of the human body, even in the age of medical advancement, is not such that we can accurately predict when someone may die and assisted dying could lead to people ending their lives prematurely. International examples of assisted dying legalisation also raise concern - particularly where it has been legalised for under 18 year olds, those with mental rather than physical conditions or where it is seemingly being offered as an alternative to proper medical care. For a minority their opposition derives from their religious beliefs.

What then makes this debate so fraught is that both supporters and opponents of assisted dying have well reasoned, emotive and often deeply personal arguments for their stated position. It is hard to listen to a patient suffering from a terminal degenerative condition arguing that they want to die on their own terms and not believe that they should have that right. At the same time, hearing the testimony of disabled activists who argue that legalising assisted dying would devalue their lives and leave them vulnerable to coercion and discrimination is enough to give even the staunchest advocate of legalisation pause for thought.

This week Parliament will consider the issue of assisted dying and specifically whether or not to give a Bill that would legalise assisted dying in England and Wales a second reading for only the second time in a decade. It looks set to be one of the defining debates of the new Government.

In engaging in this debate parliamentarians should not assume that conversations around death and dying are alien to their constituents. Beyond the public's views on assisted dying specifically, perhaps the most striking finding from this research is the extent to which the public have thought and talked about their own death. People's views on the issue are shaped directly by their own life experiences and, in conversation, the public will talk freely and emotively about their own experiences with friends and relatives who have suffered from terminal illnesses.

For that reason, what emerges from conversations with the public and polling research is broad support for the principle of legalising assisted dying - in fact there are very few areas of the UK where an outright majority are not in favour. But that support is not unconditional, Britons also want a bill with maximum safeguards - particularly to protect those who may be vulnerable to coercion. The public also wants to ensure that eligibility is limited to those who are genuinely suffering from terminal illnesses and are clearly reaching the end of their life. In conversation people are clear they do not underestimate the challenge of balancing choice for those who want to seek it and safeguards for those who may otherwise be pressured into it. Nor are Britons immune to the fact that differing public demands as to what assisted dying should look like can appear contradictory and at cross purposes. Nonetheless, a clear majority believe that crafting legislation that gets the balance right is possible.

More in Common has written this report not because we take a view on the legislation being proposed - indeed the authors of this report themselves span the spectrum of different views on assisted dying - but because a debate on such an important issue that matters so deeply to the public should be informed by what the public want and expect, particularly in the absence of a formal public consultation. While the provisions in the bill being discussed next week would apply only to England and Wales, similar legislation is also being considered in Scotland and for that reason this research covers public opinion on the issue across Great Britain.

While public opinion is not the sole determinant of how MPs should vote, it is vital that, regardless of the decision MPs come to, the public should believe the issue has been given proper and thorough consideration. The public want to know that MPs have properly weighed public support for legalisation against the need to ensure robust safeguards, proper implementation and monitoring. The least desirable approach would be one that either passed the legislation in haste or which too hastily rejected the issue at second reading leaving a further decade before it is reconsidered.

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Instead in this debate, a debate about the most important of all decisions, Parliament should be given the opportunity to properly scrutinise, amend and strengthen the legislation before deciding whether the Bill meets those public expectations of robust safeguards and proper resourcing.

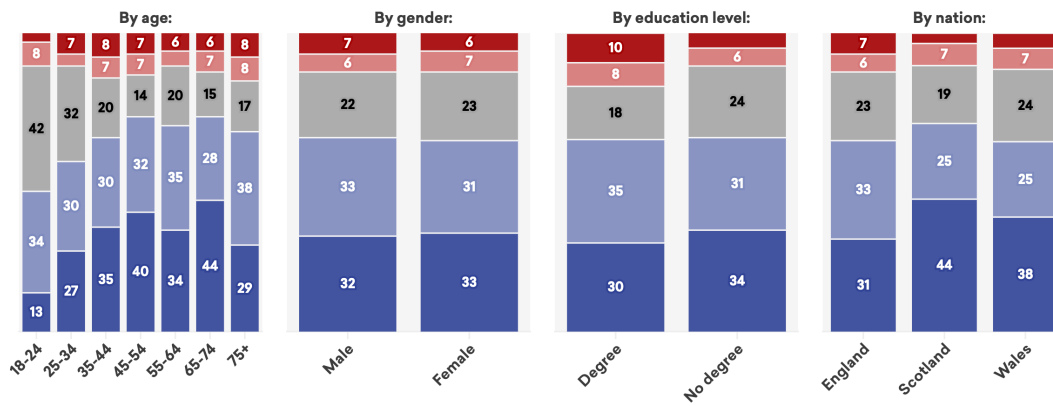
## Executive Summary

### A clear majority of Britons support legalising assisted dying, but their support is conditional on robust safeguards

Nearly two thirds of Britons (65 per cent) support legalising assisted dying. Only 13 per cent would oppose it. 55 per cent of Britons would consider seeking assisted dying if they were diagnosed with a terminal illness. Support for legalisation spans age, gender, region and voter group. In only seven British parliamentary constituencies does support for legalising assisted dying drop below 50 per cent. That support is however firmly conditional on strong safeguards being put into place: 62 per cent of the public favour more restrictive eligibility with robust safeguards compared to 29 per cent who favour lower safeguards to avoid barriers to access.

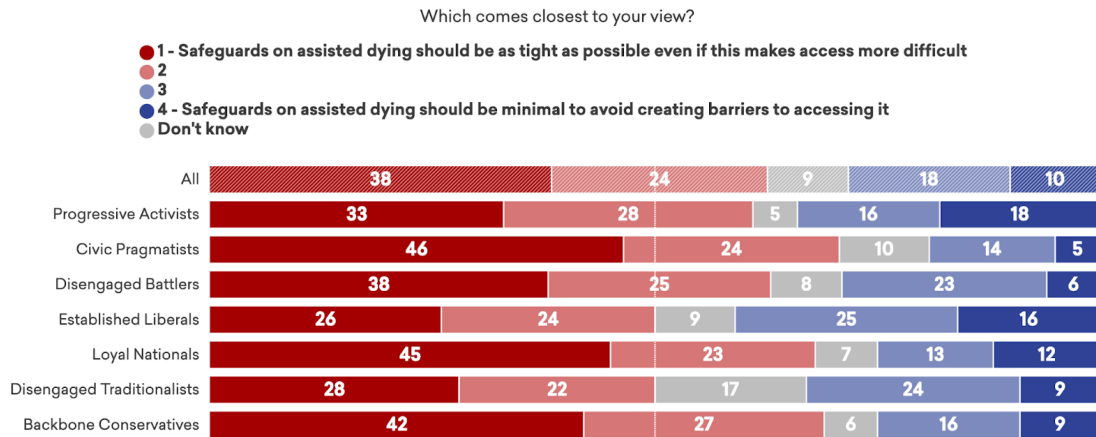
### Support for assisted dying spans Britain's divides

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?





## The public prioritise stronger safeguards over wider access to assisted dying



Source: More in Common • November 2024

### Those who have lost relatives recently or experienced terminal illness in the family are both more supportive of legalisation and of instituting tough safeguards

Views on assisted dying do not divide along traditional party lines, but instead personal experiences with death and illness tend to shape individual perspectives. Those with higher threat perception are the most likely to support legalisation to provide them and their family members an option to avoid indignity and suffering. Those who have lost parents in the last five years are 18 points more likely to strongly support assisted dying than those who have not lost their parents. Those who have experience of a relative with a terminal illness are nine points more likely to strongly support legalisation. However, these same groups are also the most supportive of strict safeguards.

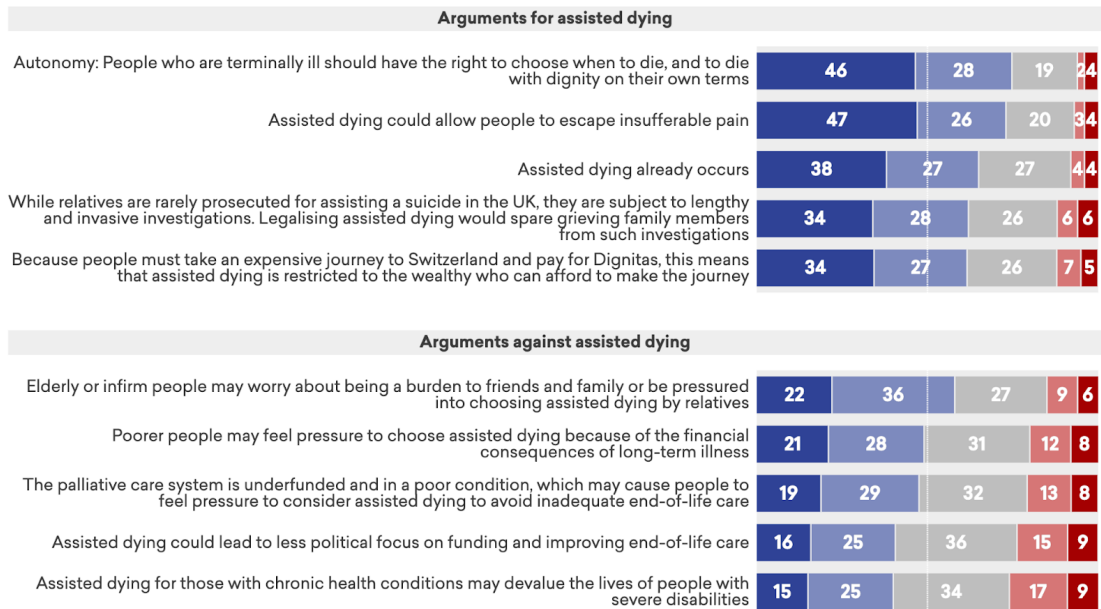
### Arguments of autonomy and allowing people to escape pain are the strongest arguments in favour of assisted dying

74 per cent of the public find the argument that people who are terminally ill should have the right to choose when to die on their own terms a convincing one. A similar number believe the idea that legalising assisted dying could allow people to escape insufferable pain is a convincing argument for legalisation. Supporters and opponents of assisted dying also find the argument that the UK could impose tighter restrictions than exist for those who travel to Switzerland to receive help to die convincing. The argument that we do not allow our pets to suffer emerges frequently in focus group conversations and is one of the key ways that the public conceptualises the assisted dying debate. 62 per cent of the public find the argument that we don't let our pets suffer to be a convincing one for legalisation.

## Most convincing arguments for and against assisted dying

Top five most convincing arguments tested from each category

● Very convincing ● Somewhat convincing ● Neither convincing nor unconvincing ● Somewhat unconvincing ● Very unconvincing



Source: More in Common • November 2024

### The most convincing arguments against assisted dying are that the elderly or the financially vulnerable may feel pressured to choose assisted dying

While only 13 per cent of the country oppose assisted dying, 58 per cent of the public find convincing the argument that assisted dying may mean that elderly people seek it out because they worry about being a burden or because they are pressured to choosing assisted dying. Almost half of the public find the argument that poorer people may feel financial pressure to pursue assisted dying convincing. Opponents of assisted dying are particularly likely to find convincing the argument that doctors are trained to save lives, not end them, though this has less resonance among the general public (67 per cent of opponents find this convincing, compared to just 39 per cent of the general public).

### The public want clear and tight restrictions on eligibility for assisted dying

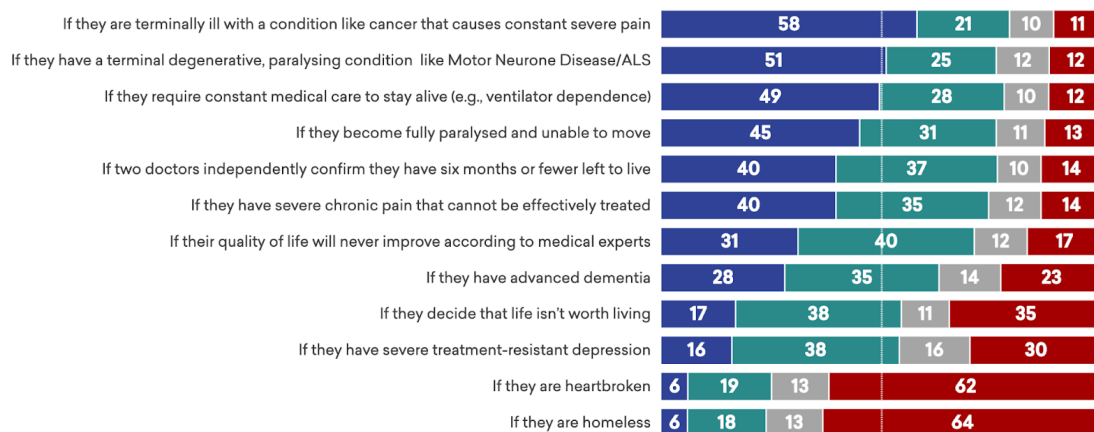
58 per cent of the public think that those who are terminally ill with conditions that cause constant severe pain, such as cancer, should be able to access medical assistance to end their own lives - a further 21 per cent think it depends on the circumstances. 51 per cent also believe those with terminal degenerative paralysing conditions should be eligible with a further quarter saying they should be eligible in some circumstances. The public are most torn on whether people suffering from dementia should be able to access assisted dying, often balancing what they believe would be their own desire to end their lives in those circumstances with the difficulties of ensuring informed consent. 50 per cent of the public

believe that eligibility should be on the basis of a strict set of conditions, while 25 per cent believe it should be on the basis of how long doctors believe a person has left to live. Separately, 6 in 10 people oppose making assisted dying available to people on the grounds of severe mental illness.

### Who do Britons think should be eligible for assisted dying?

In each of the following cases, do you think people should be allowed to legally seek medical assistance to end their own lives?

● They should be able to access medical assistance to end their lives ● It depends on the circumstances  
 ● Don't know/Prefer not to say ● They should NOT be able to access medical assistance to end their lives



Source: More in Common • November 2024

### The public have concerns about the NHS's ability to deliver assisted dying

Only 26 per cent of the public believe that the NHS is currently in a fit state to provide people with the option of assisted dying compared to 74 per cent who believe it is not. While overall the public tend not to think that legalising assisted dying would detract from improving palliative care, a significant minority (44 per cent) do hold this view. This concern is particularly strong among opponents of assisted dying with 73 per cent worried about the impact on palliative care.

### Strict safeguards are Britons' top priority if assisted dying were to be legalised

72 per cent believe it is essential that there is proof that people are not being pressured into assisted dying. Two thirds believe that assessment by multiple independent doctors is essential and 62 percent believe there must be formal assessment of a person's decision making capacity. 56 per cent of Britons would also want to see some background check against potential financial motivations for family members to pressure relatives into assisted dying. Despite these concerns over safeguards, a majority (56 per cent) believe that giving people the freedom to end their lives outweighs the risk that people are pressured. 71 per cent of the public believe it is possible to design a system that legalises assisted dying while protecting the vulnerable from coercion.

## Most Britons think it is possible to design an assisted dying bill with the right safeguards in place

Which of these comes closest to your view?

- It is possible to design a system that allows those who are terminally ill to access support to end their own lives through assisted dying that also has adequate safeguards to protect vulnerable people from being pressured to end their own lives.
- It is not possible to design a system that allows those who are terminally ill to access support to end their own lives through assisted dying that also has adequate safeguards to protect vulnerable people from being pressured to end their own lives.



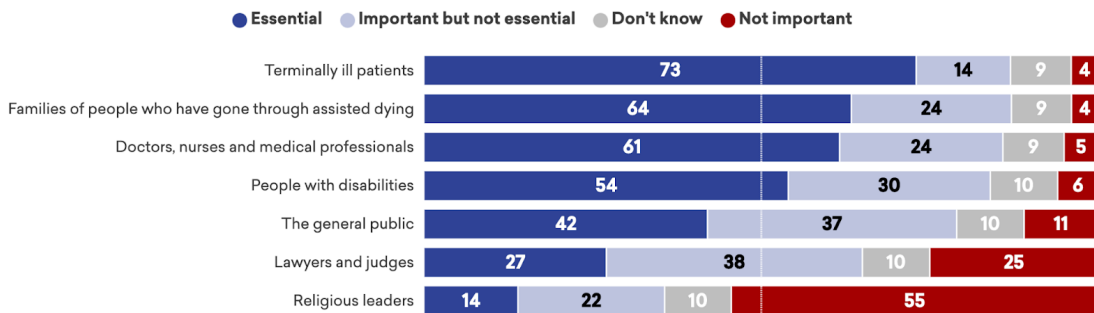
Source: More in Common • November 2024

## The public want greater consultation, scrutiny and expert input

Three in five Britons say more public consultation is needed before legislation passes through the parliamentary process. However, currently under a third of the public trust parliamentarians to make the right decision on assisted dying, and they are equally split on whether MPs should vote with their conscience or on the basis of what their constituents think.

## The public want parliamentarians to listen to terminally ill patients, families with lived experience, and medical professionals when making their decision on assisted dying

How important is it that politicians listen to each of the following groups before they make their decision on assisted dying?

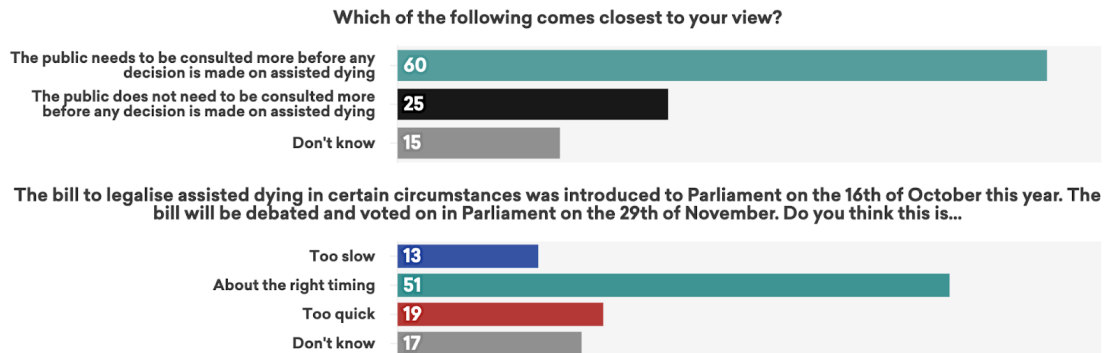


Source: More in Common • November 2024

At the same time, the public do not think there needs to be a trade-off between passing legislation in a timely manner and greater consultation. If the Bill receives a second reading, this places a greater premium on Parliamentarians using the Bill's Committee stage to draw in knowledge from medical experts and the lived experiences of people who have suffered

from terminal illness or families who have used assisted dying abroad. Civic institutions and the BBC in particular should be doing more to engage the public with the arguments for and against legalisation.

### The public want more consultation, but few want the Bill to progress more slowly



Source: More in Common, November 2024

### Proceeding with caution

Given clear support for the principle of assisted dying, public expectations would be best met by giving the Bill a second reading allowing issues around eligibility, safeguarding and implementation to be more thoroughly and forensically explored, along with expert opinion, in future parliamentary stages.

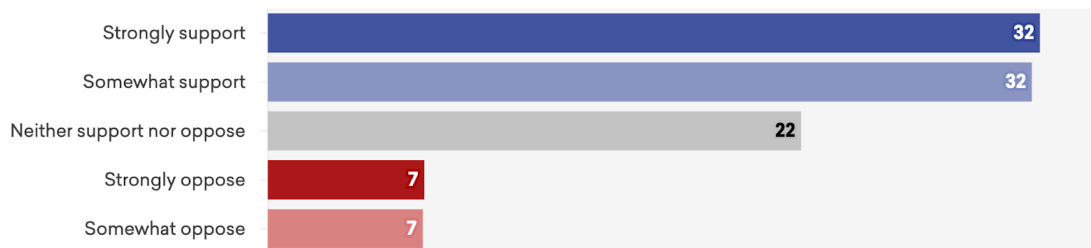
The Government should allow greater parliamentary time to enable that and to scrutinise the Bill. Specific consideration should be given to whether a tighter eligibility criteria - based on a list of conditions rather than life expectancy alone - should determine eligibility, as well as the feasibility of introducing more stringent checks against motivations for coercion. Throughout subsequent stages of the Bill's passage MPs and Peers should consider, along with their own views, the extent to which they have met the public's tests and expectations - particularly on safeguarding - before deciding to pass legislation on such an important matter. Regardless of the outcome of Friday's vote, this will not be the end of the conversation about assisted dying in Britain.

## Chapter 1: Topline views on assisted dying

The British public support the principle that terminally ill people should be able to seek help to end their own lives. Britons are five times more likely to support than oppose a change in the law to allow assisted dying under certain circumstances, with 65 per cent in favour and only 13 per cent opposed.

### Britons are five times more likely to support than oppose assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?



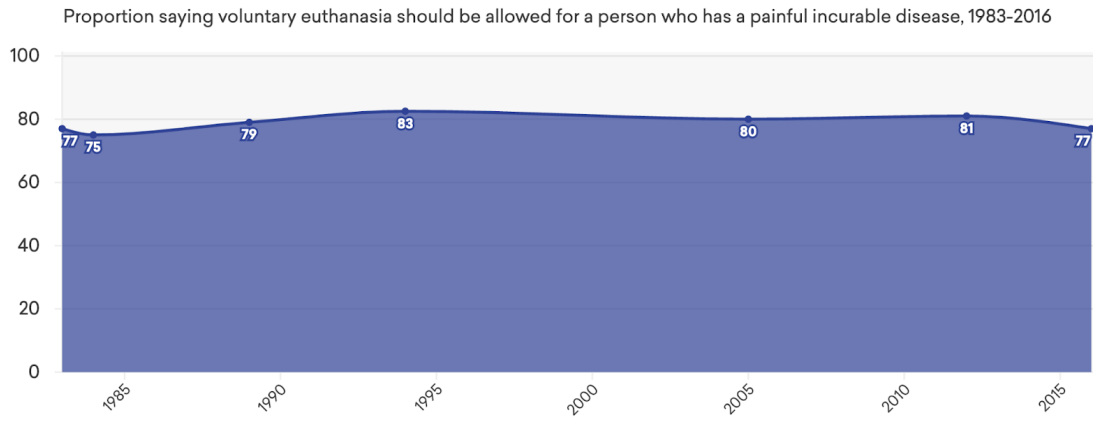
Source: More in Common, November 2024 • Due to rounding, total support equals 65 per cent and total opposition is 13 per cent

This support is not new. Britons were first polled on their attitudes to assisted dying for people with terminal illness 74 years ago in 1950<sup>1</sup>. Then, 55 per cent supported the principle and only 24 per cent opposed it. Since 1983 The British Social Attitudes Survey<sup>2</sup> has tracked British support for voluntary euthanasia for people with incurable painful disease. The study shows that support in 2016 for assisted dying was the same as it was 33 years earlier in 1983.

<sup>1</sup> [The Gallup international public opinion polls, Great Britain, 1937-1975](#)

<sup>2</sup> [Moral issues - Sex, gender identity and euthanasia](#), British Social Attitudes Survey

## Support for assisted dying is the same now as it was in 1983

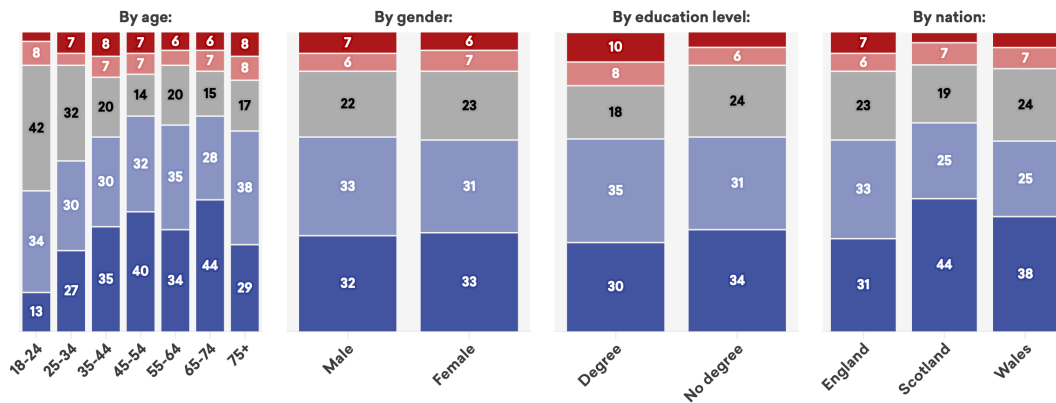


Source: More in Common • British Social Attitudes Study

Support for legalising assisted dying spans British society. Across every age group, gender, nation, major ethnic groups, and education level in Britain, support for a change in the law far outnumbers opposition to it.

## Support for assisted dying spans Britain's divides

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?



Source: More in Common • November 2024

In only seven of the 632 British parliamentary constituencies do fewer than half of adults think that terminally ill people should be able to seek medical support to end their own life. There are no constituencies where opponents outnumber supporters.

## Support for legalising assisted dying only falls below 50 per cent in 7 constituencies

Which of the following comes closer to your view?  
Those who are terminally ill or in pain [should / should not] be allowed to seek medical help to end their own life  
% selecting SHOULD

46% 53% 60% 66% 73% 80%

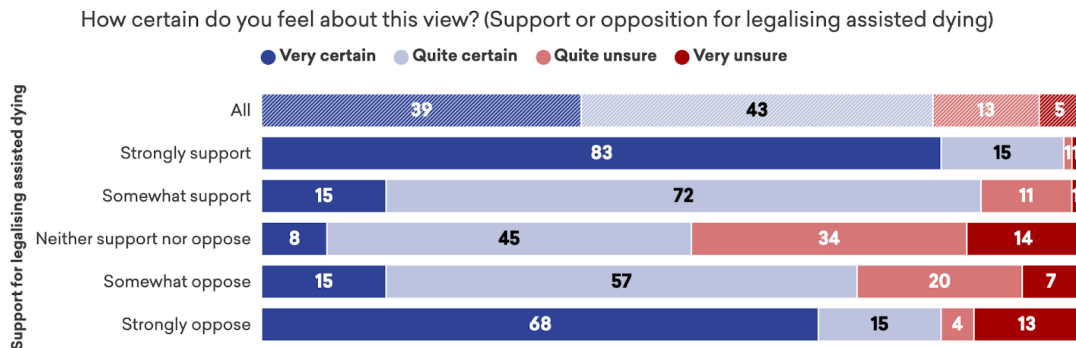


Source: MRP of 9,652 people, 7th July - 27th August 2024

Despite the certainty suggested by these numbers, assisted dying is not a topic that most Britons have weighed in detail, and many do not have a fixed view on what assisted dying should, or would, look like were it to be implemented. Just 39 per cent say they are “very certain” of their view on the matter, and those who say they only “somewhat” support or oppose assisted dying are, as might be expected, the least certain.



## Only two in five Britons are “very certain” about their views on assisted dying



Source: More in Common • November 2024

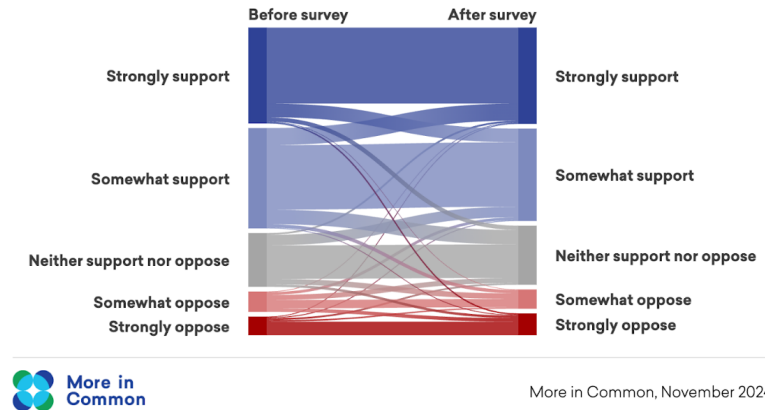
In focus group conversations this dynamic is particularly clear. While most focus groups of those in favour of assisted dying begin with participants expressing full throated agreement in principle, support for the issue tends to become more nuanced and conditional on safeguards after the discussion - even if their views rarely change outright. In other cases, people enter a conversation softly supporting or opposing the principle of assisted dying and, after talking about it in more detail, end the conversation firmer in their convictions.

*I'm split. Originally I said I was totally opposed, but I'm split, but more over the side of not agreeing with it because I think it's different for different circumstances*

**Lily, Ilford**

That fluidity of Britons’ views on assisted dying is also revealed in polling. Before being exposed to arguments for and against assisted dying and asked about the details of its implementation, 65 per cent of the public support legalising assisted dying and 13 per cent oppose it. By the end of a survey which considers these issues those top-line numbers were essentially unchanged, with 62 per cent supporting legalisation and 14 per cent opposed it. However, behind these headline numbers, a third of respondents (32 per cent) changed their view during the survey. Only 81 per cent of those who started the survey saying they strongly supported assisted dying held the same view after being exposed to arguments for and against, and only 74 per cent who started the survey strongly opposed to assisted dying ended the survey with the same view. While few people moved from outright support to opposition or vice versa through the survey, many people softened their views while others became more firm in their convictions - moving between strong and soft support.

## A third of Britons changed their minds on assisted dying after taking a 15 minute survey about the issues



Supporters of assisted dying approach the issue from different angles. Some supporters see it in plain terms as the right of the individual to be able to decide when to die. Others take an approach rooted in compassion, arguing that assisted dying should be legalised because it would end a great deal of suffering and misery for people with terminal illness. Smaller minorities support assisted dying because of the financial pressures that they believe terminally ill people place on the state, because they wouldn't want their family members to experience living with terminal illness, or because the current system - where few can afford to travel to Switzerland - is unfair. The analogy that 'we don't let pets suffer so why do we expect humans?' is raised in almost every focus group conversation on assisted dying.

*I really don't like when anyone gets involved in someone else's liberty. When it comes to your life, you should be able to make the decisions. (...) People shouldn't be forced to live on medication and forced to live, you know, in, in a way that you don't want to live. That just doesn't seem fair to me.*

**Daniel, Progressive Activist, Dulwich**

*I don't want people to end their lives, but neither do I want to see somebody in such pain on a daily basis, an hourly basis. That is just cruel.*

**Peter, Established Liberal, Maidenhead**

*I think as long as someone can make a fully informed decision, why would you make them go through pain that they want to try and avoid? I know there's obviously options in Europe, so Switzerland for example. So actually if someone is determined to do it, there are options. Again, it probably just prolongs the pain, the expense of having to go abroad, whereas they can stay closer to home as long as that full assessment is being completed, like you say by two medical professionals and a judge, it does give those people another option to prevent additional unnecessary suffering.*

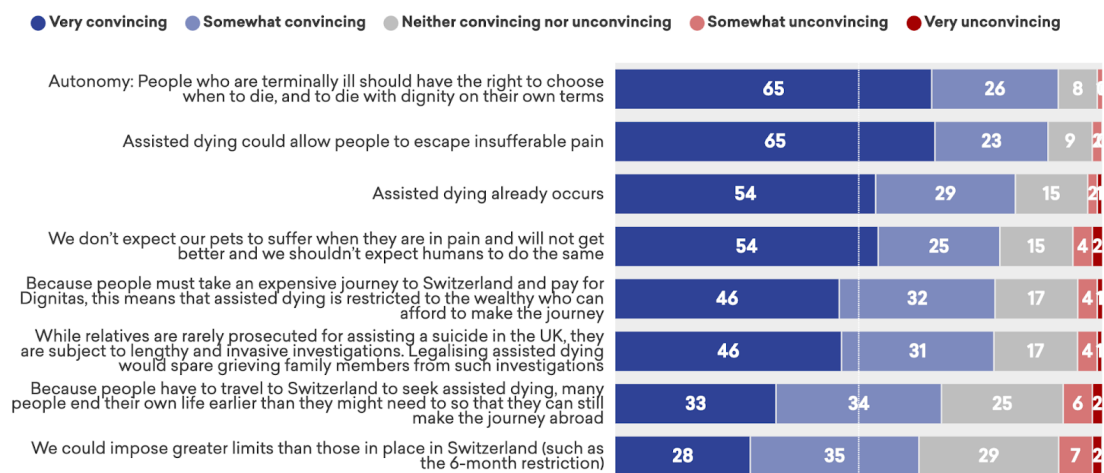
**George, Established Liberal, Oxfordshire**

*You wouldn't put an animal through it, so why do we allow our loved ones to go through it?*

**Emma, Civic Pragmatist, Oxfordshire**

Supporters of assisted dying find all of these arguments convincing, but the top three most persuasive arguments are personal choice and autonomy, prevention of pain and the fact that assisted dying already occurs by other less scrutinised means.

### Most convincing arguments for assisted dying, to people who support assisted dying



Source: More in Common • November 2024

The expectation that Britain would be able to set stricter standards than are placed on those who travel to Switzerland is convincing for both people who support and oppose a change in the law.

Outright opposition to assisted dying in Britain is limited to just 13 per cent of the population, 58 per cent of whom say they are religious (compared to 34 per cent of the country as a whole). While opponents of legalisation are disproportionately religious, they also draw on a wide range of non-religious reasons for their objections:

*I understand why people would want to do it, but I can't, just can't agree with it because I know people who have lost others. I've lost people myself. I'd do anything to spend another five minutes with them.*

**David, Ilford**

*I mean this opens up the whole Pandora's box. Once you make this legal, it'll lead to people thinking of other sort of mental illnesses, then the bar will get even lower. So it*

*just opens up the whole possibility of getting a legal confirmation for suicide. And that's why I'm completely against it*

**Omar, Ilford**

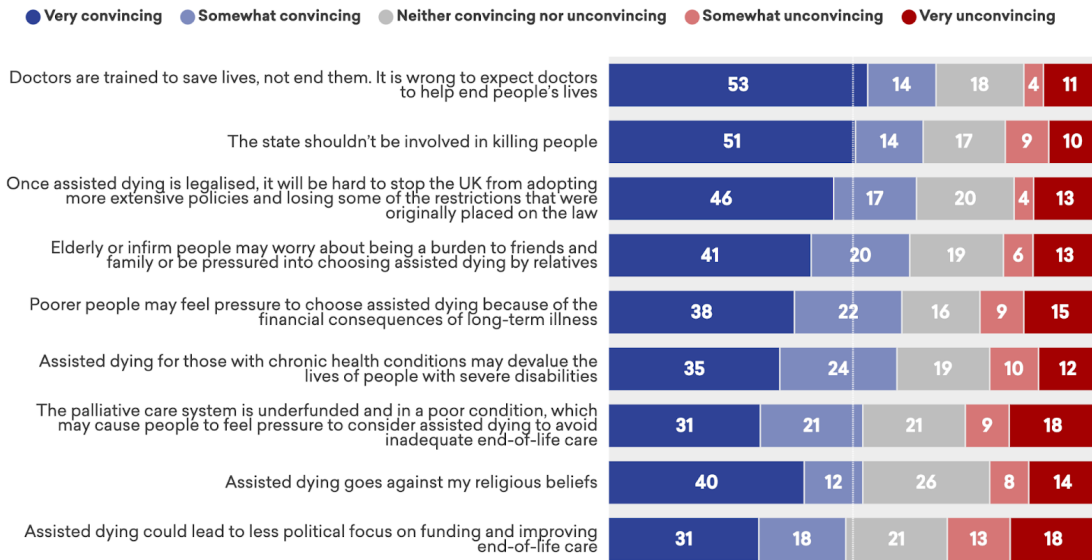
*The person who's elderly may feel they're a burden and they want to help their children, especially if they're in a difficult financial situation. So that wouldn't be given as an excuse at the time when they're applying for assisted dying. But I don't know how you could safeguard against that in the background*

**James, Civic Pragmatist, Dulwich**

Religious objections are actually the least convincing argument against assisted dying for those opposed to introducing it in Britain. For opponents, secular arguments are the most compelling. Top of the list is a concern that assisted dying would change the role of doctors and place unfair expectations on them - 67 per cent of opponents of legalising assisted dying find this convincing along with 33 per cent of supporters.

Slippery slope arguments have dominated the assisted dying debate so far. Concern has been expressed that even a tightly drawn bill would end up later being unwound and expanded either by Parliament or the Courts, as has happened in some international case studies. For opponents of assisted dying that slippery slope argument is the third most convincing. Opponents of assisted dying are also convinced by the argument that the state shouldn't be involved in killing people. These arguments do not resonate as strongly with supporters of assisted dying, who are more convinced by arguments that elderly people may feel like a burden or that people may be pressured into pursuing assisted dying by family members.

## Most convincing arguments against assisted dying, to people who oppose assisted dying



Source: More in Common • November 2024

The argument that legalising assisted dying, particularly if it encompassed chronic health conditions, would devalue the lives of those with disabilities is one that has been powerfully raised by activists and campaigners. Even though this is not ranked as one of the most convincing arguments against legalisation, 59 percent of opponents of assisted dying are convinced by it with 38 per cent of supporters of assisted dying also sharing this view. In fact in general, Britons are not so set in their views on assisted dying that they do not appreciate opposing arguments, in fact a feature of focus group conversations is that people on either side tend to readily acknowledge and wrestle with arguments from the 'other side', rather than dismissing them outright.

Most people who support assisted dying, for example, share concerns that elderly people might end their lives to avoid being a burden, or that the poor state of Britain's palliative care system means people might feel pressure to take their own life. Conversely, a plurality of those opposed to assisted dying are convinced by the arguments that legalisation would reduce suffering for those in pain and would allow us to implement stricter rules than affect those who already travel to Switzerland.

## Many arguments for and against assisted dying are convincing to both those supporting and opposed to it

Highlighted arguments are convincing to people on both sides of the debate

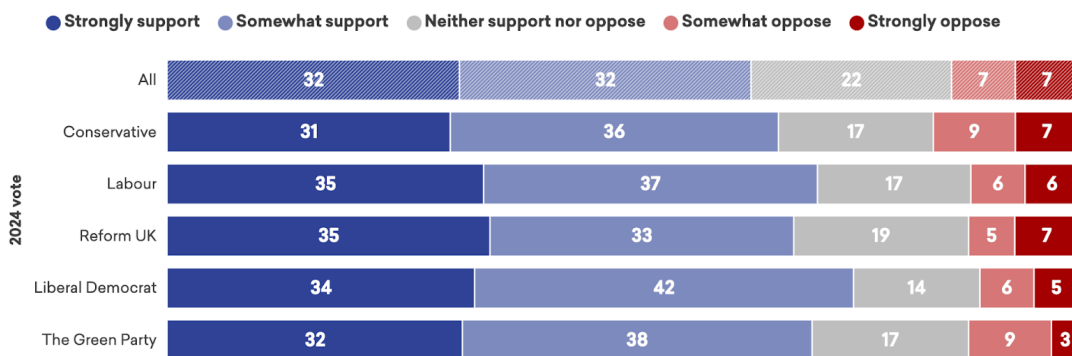


Source: More in Common • November 2024

The British public are not polarised on assisted dying along partisan lines - voters of all the main parties - including the Greens and Reform UK - are in broad terms equally likely to support or oppose assisted dying. This speaks in part to Britain's resilience against American-style "stacked identities", where views on any given debate are highly pre-determined by an individual's partisan leanings.

## Britons are not polarised on assisted dying on partisan lines

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?



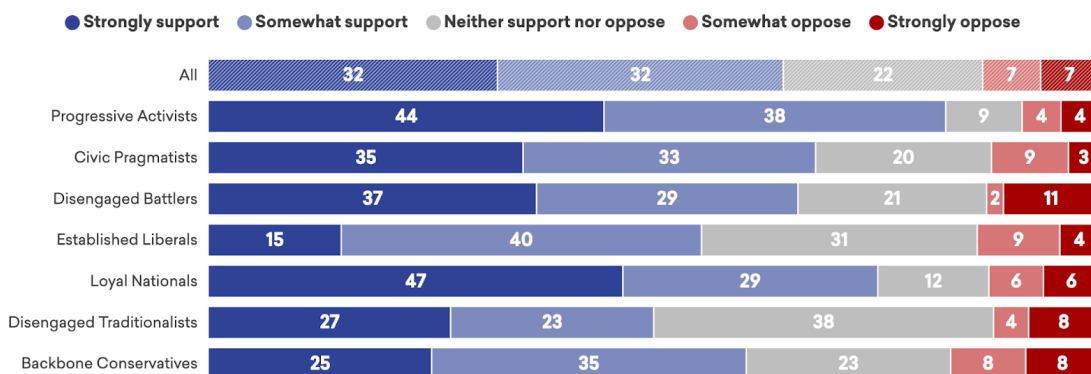
Source: More in Common • November 2024

However, while there is broad support for assisted dying across Britain and across party lines, More in Common’s British Seven segments help to illuminate how individuals’ values and worldviews influence support and opposition for legalisation.

Drawing on social psychology this segmentation helps to understand how upstream values relate to support or opposition to legalising assisted dying.

## Loyal Nationals and Progressive Activists are most likely to support assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?



Source: More in Common • Fieldwork 9 - 11 November

The segments most in favour of assisted dying are Progressive Activists and Loyal Nationals (the segment who have been the subject of most political attention in recent years, switching from Labour to Conservative in the late 2010s to deliver Boris Johnson's victory in the Red Wall, before swinging back to Labour and Reform UK in 2024). Progressive Activists will tend to be motivated by a desire to drive progress in society towards relieving suffering, and ending the injustices created by the current system. Loyal Nationals share many of these concerns but also have a uniquely high threat perception. High threat perception is foundational in their views on assisted dying (and many other issues) - this group thinks more about their own death than other segments do, and they are very alert to the threat of loved ones falling ill and suffering.

*It's a hard one really because if you can see that person's struggle and the pain and they just want to end it all, whether it's an illness, mental illness, physical illness, you can kind of empathise with them*

**Khadija, Loyal National, Spen Valley**

*This is going to become more prevalent over the years with people getting older and having more susceptibility to conditions which do sometimes result in, unfortunately, a lingering and painful death*

**David, Loyal National, Spen Valley**

One approach to quantifying relative threat perception is measuring the extent to which an individual or group thinks the world is becoming 'a more dangerous place'. Contrary to conventional wisdom, where we might expect responses to this question to change with world events, Britons' answers have been remarkably stable even as conflicts have escalated around the world.

As such, the extent to which some Britons are more or less likely to see the world as a dangerous place than others is relatively fixed - reflecting their internal perception of threat rather than a dynamic reaction to events around the world. Of those with high threat perception, 66 per cent support assisted dying, compared to 45 per cent with lower threat perception.

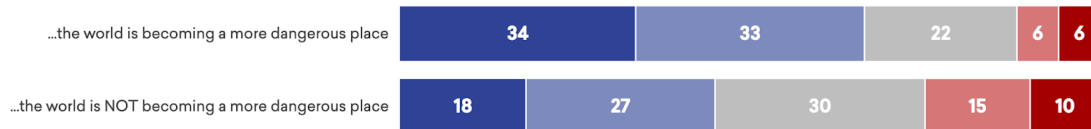


## Groups with higher threat perception are much more likely to support assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?

● Strongly support ● Somewhat support ● Neither support nor oppose ● Somewhat oppose ● Strongly oppose

People who think...



Source: More in Common • November 2024

Higher threat perception seems to make people more alert to the potential suffering caused by terminal illness, more likely to think it might affect them or their family and therefore more motivated to find ways to mitigate its impact on them and their family in later life. Because high levels of threat perception are found on both the left and right of political division, it is a useful additional axis through which to explore attitudes on assisted dying.

Opposition to assisted dying is most concentrated among the Established Liberals and Backbone Conservative segment, though members of both segments are much more likely to support than to oppose assisted dying.

For Backbone Conservatives, higher opposition is informed both by the segment’s general scepticism and wariness about the unintended consequences of social change, and the higher religiosity of that segment. For Established Liberals, opposition is driven by their stronger satisfaction with the status quo, a more conceptual worldview than other segments and greater awareness of ‘slippery slope’ case studies from abroad. Politicians, policymakers and commentators are disproportionately likely to be drawn from the Established Liberal segment.

*So the idea of self-determination is one that I'd support. But I think the big problem - as it often is with almost any law - is how do you protect the vulnerable who get convinced into perhaps making decisions before they're ready to make them? There's no such thing as a perfect law in my view. There would be abuse of that to some degree. How are we prepared to deal with it?*

**Simon, Established Liberal, Maidenhead**

Britain is divided in other ways on assisted dying. The most obvious is on religious lines. In focus groups, religious participants often have the clearest and least malleable views on assisted dying. Those who are more religiously minded have a greater tendency to enter conversations from a starting point of opposition to assisted dying and to hold that throughout discussions.

*On the religious side, so I'm a Muslim and what we believe in is that life can only be taken away by God*

**Raza, Ilford**

*All human lives are precious no matter what state they are in*

**Omar, Ilford**

Overall opposition to assisted dying is more than four times higher among the groups in Britain to whom religion is most important when compared to those who say that religion is not important at all in their life - although again people of faith are still much more likely to support than oppose assisted dying in general.

### Religious Britons are much less likely to support assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?

● Strongly support ● Somewhat support ● Neither support nor oppose ● Somewhat oppose ● Strongly oppose

How important is religion in your life?



Source: More in Common • November 2024

Personal beliefs beyond organised religion also shape Britons' perspectives on assisted dying. For example, a fifth of those who say that religion is not important in their lives believe in an afterlife nonetheless, and people who believe in an after-life are significantly more likely to oppose assisted dying. A third (32 per cent) of Britons believe in an afterlife, and this is higher among younger generations, 43 per cent of those younger than 30 say they believe in an afterlife.

## Britons who believe in an afterlife are more likely to oppose assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?

● Strongly support ● Somewhat support ● Neither support nor oppose ● Somewhat oppose ● Strongly oppose

Do you believe in an afterlife once you have died?



Source: More in Common • November 2024

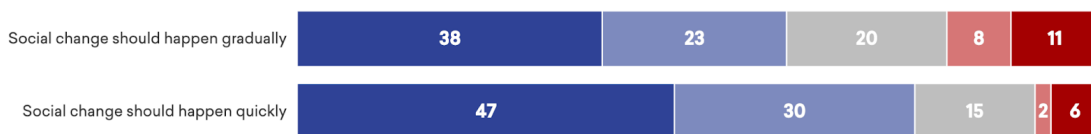
People who are generally more sceptical about the pace of social change in the UK are more opposed to changing the law to legalise assisted dying than those who would prefer to see social change happen quickly.

## Supporters of rapid social change are much more likely to support legalising assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?

● Strongly support ● Somewhat support ● Neither support nor oppose ● Somewhat oppose ● Strongly oppose

Which do you agree with more?

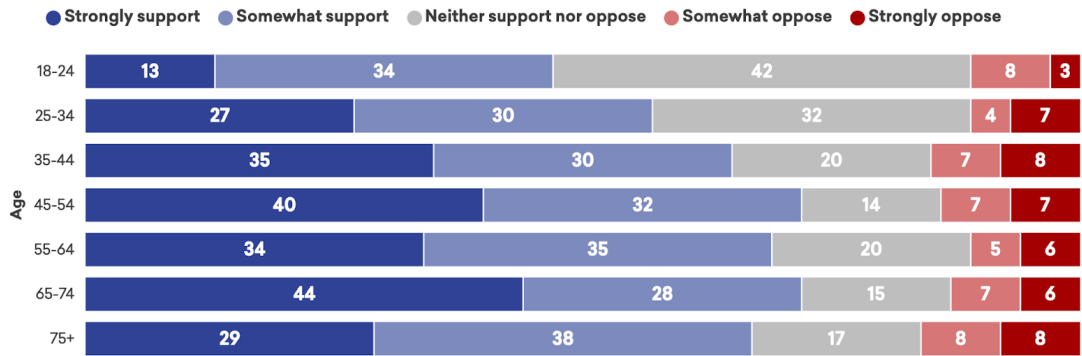


Source: More in Common • November 2024

Older generations are also significantly more in favour of legalising assisted dying than younger generations. While opposition to assisted dying is mostly flat across age groups, younger Britons are much more likely to say they don't have an opinion either way. The public's views on assisted dying tend to crystallise as they experience the death of family members or loved ones, or have experiences with people who are terminally ill. People also form stronger views on assisted dying as they come to think more about their own death.

## Younger Britons are least likely to support assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?



Source: More in Common • November 2024

Beyond these identity markers and worldviews that shape the extent of people’s support for assisted dying, it is clear from the qualitative research that opinions on legalisation are deeply rooted in personal experience. The next chapter explores how Britons’ own relationships with death and illness are closely connected to their broader views on assisted dying.

## Chapter 2: Britons' personal experiences of death

The Assisted Dying Bill has surfaced a national conversation about illness, death and the choices we face at the end of our lives.

But these discussions aren't new - they are and have been quietly happening across the country even without the prompt of legislation in Parliament. Many Britons are engaging and grappling with the issue and how it might affect them: a third of people aged over 65 have discussed assisted dying with their families, while 45 per cent of Britons say they've thought about it "a great deal" or "a fair amount".

***This is going to sound weird, but I think about it quite a lot.** I don't know. I agree with it. I'm currently caring for someone at the moment who's got a brain infection and in the space of several months they've gone from working to bedridden, not knowing who anyone is, can't do anything, can't speak, can't eat, living off a bite of food every day. And I know if I was in that situation, if I knew that was coming, then I would be gone long before.*

**Luke, Disengaged Traditionalist, Bridgend**

*I am tentatively for it. **I recently lost my father to cancer and seeing him go through those stages has sort of painted my view on this.** The only thing I would say is that the safeguards in place would have to be very, very tight and very secure.*

**John, Established Liberal, Oxfordshire**

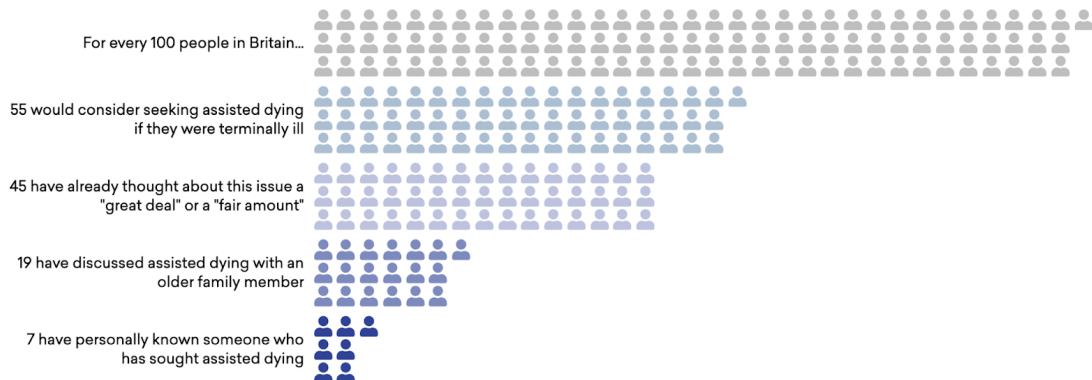
*So my uncle got diagnosed with cancer (...) and he got told he's going to die within two years, flat out. He wanted to give up, but we were talking him out of it. (...) He passed away last year, but he ended up outliving those two years and living for seven and a half years. (...) His kids got to keep him, and he got to experience more. He got to see my cousin's kids; **he ended up becoming a granddad.***

**Zain, Loyal Nationa, Spen Valley**

When people think about assisted dying, their views are invariably formed by their personal experiences. In focus groups participants spontaneously share deeply personal stories about their own health struggles, the loss of loved ones, surprising recoveries and hard decisions.

It's clear that how Britons think about, talk about and experience death and illness shapes how they see assisted dying.

## Britons are already thinking and talking about assisted dying



More in Common, November 2024

## Discussing death

Conversations about death are a common part of life in Britain. Half of Britons have discussed with family whether they'd like to be buried or cremated and 46 per cent have talked about plans for their possessions once they die.

*All of my family know that if I was ever diagnosed with something like motor neurone disease or whatever, I will be over to Switzerland getting a plan in place so that when the time came I could just head off over there*

**Helen, Oxfordshire**

*I think we need to speak an awful lot more about what our wishes are and having seen family, grandparents and everything else, our family, even my own parents, they're talking about it a lot more now (...) but I'm glad it's being discussed*

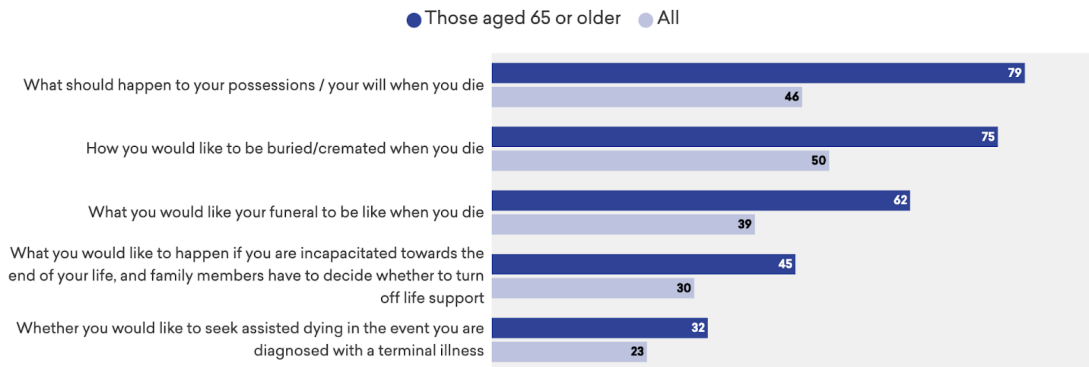
**Sarah, Loyal National, Spen Valley**

These discussions naturally become more frequent with age. Among those aged 65 and older, a majority have talked about their funeral arrangements and nearly 80 per cent have discussed their will.

People's thoughts on assisted dying often arise in these broader conversations about death. One in four adults have discussed whether they would consider assisted dying if diagnosed with a terminal illness - a figure that rises to one in three among older people.

## A third of older Britons have discussed assisted dying with family

Have you ever discussed any of the following with close family members?



Source: More in Common, November 2024

## The public's own preferences for the ends of their lives

The public's views on assisted dying are intrinsically tied to their own personal preferences for how they would want their own lives to end. 55 per cent of the country definitely or probably would consider seeking assisted dying personally if it were legal and they were terminally ill - and this rises to 77 per cent among supporters of assisted dying. In contrast, 60 percent of opponents to assisted dying say they would not consider seeking help to end their lives in these circumstances and 11 per cent say they would.

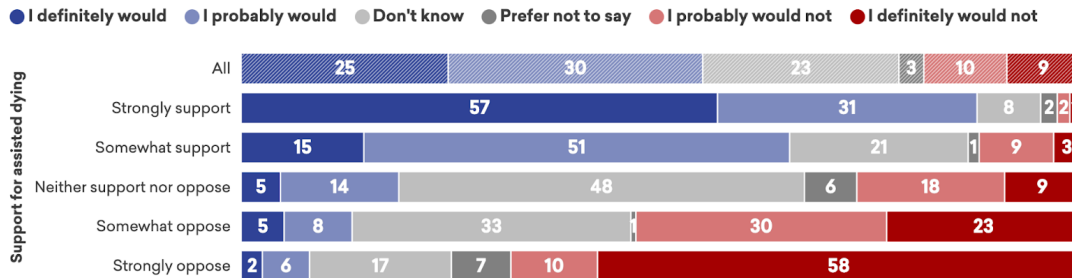
*I've always said for myself, when I got to a point at an age where I wasn't able to look after myself, my mental faculties, I would rather have the option to die gracefully than suffer for a long time*

**Tom, Civic Pragmatist, Dulwich**

Those who neither support nor oppose assisted dying tended to say they would not consider it for themselves. However, 48 per cent of this group chose "don't know," compared to 23 percent of the general public, suggesting that this is a topic they haven't engaged with as deeply as those with more firm views on assisted dying.

## Most Britons would personally consider assisted dying if they were terminally ill

If you personally were diagnosed with a painful or paralytic terminal illness, would you consider seeking assisted dying to end your life early, if it was legal to do so?



Source: More in Common • Fieldwork 9 - 11 November

## People with experience of illness and death are more likely to support assisted dying, but also want stricter safeguards

While support for assisted dying does not divide neatly along traditional lines such as age or partisanship, it is strongly influenced by Britons' personal experiences of death and terminal illness.

*I've also seen someone very slowly die of cancer and the suffering was extreme. So before that I probably would have been against it. But now I just don't think that anyone should suffer in that way and not have an option if they want to do it. I think that it should be open to them*

**Emily, Established Liberal, Maidenhead**

Those who lost a parent in the past five years are 18 percentage points more likely to strongly support assisted dying than those whose parents are still alive. Similarly, those who have had a terminally ill family member are 9 percentage points more likely to strongly support legalisation than those who haven't.

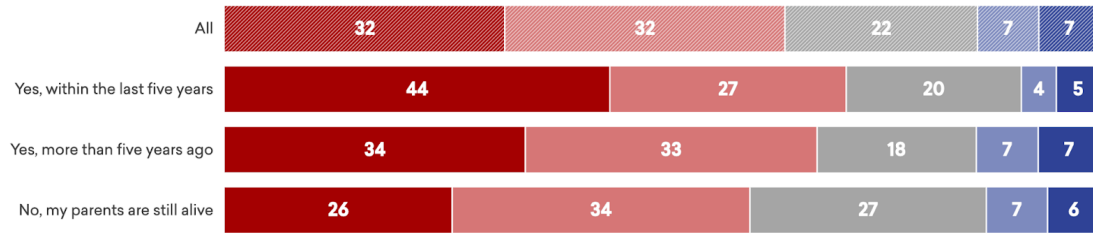


## People who have lost a parent in the last five years are 18 points more likely to strongly support assisted dying than people who have not lost a parent

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?

● Strongly support ● Somewhat support ● Neither support nor oppose ● Somewhat oppose ● Strongly oppose

Have you lost a parent in your life?



Source: More in Common • November 2024

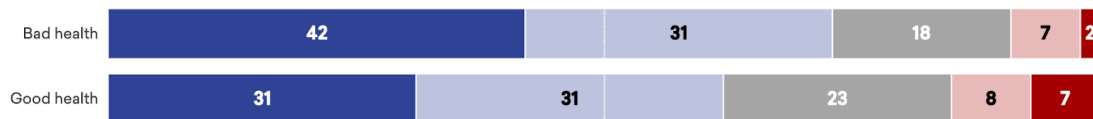
Those who are experiencing health issues are also more likely to support assisted dying. Britons who describe their general health as bad are 11 percentage points more likely to support the legalisation of assisted dying than those who describe their health as good.

## Those in poor health are 11 points more likely to support assisted dying

To what extent would you support or oppose a change in the law that allowed people, under certain circumstances, to access medical assistance to end their own lives if they wish to?

● Strongly support ● Somewhat support ● Neither support nor oppose ● Somewhat oppose ● Strongly oppose

How is your general health at the moment?



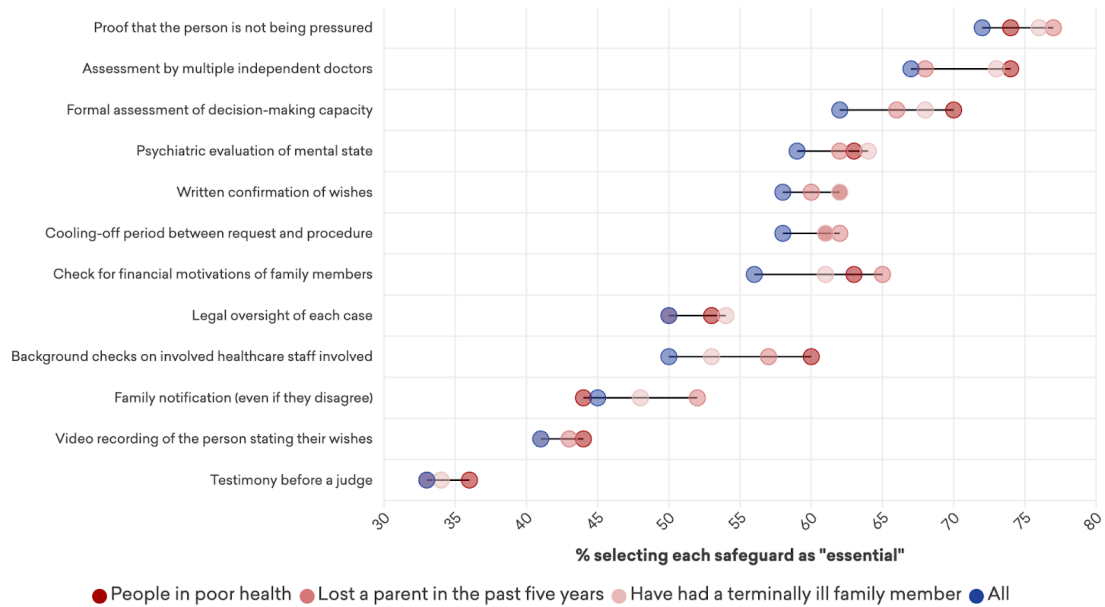
Source: More in Common • November 2024

However, this stronger support for assisted dying does not translate into a desire for more permissive legislation. In fact, people with lived experience of poor health and family bereavement seem to have deeper concerns about the potential for abuse and coercion. When presented with a list of potential safeguards family members of terminally ill patients were more likely than the average to select "essential" for ten of the twelve safeguards.

This suggests that while social proximity to illness, and personal experiences of loss and bereavement, may increase support for assisted dying, these experiences also heighten awareness of its risks. People with lived experience tend to support assisted dying, but also believe it is essential to provide strong safeguards and protections for those who may wish to, or feel pressured to, seek it.

## Those who have experienced bereavement and poor health want stricter safeguards

If assisted dying were to become legal, how important to you would each of these potential safeguards be?



Source: More in Common, November 2024

## Chapter 3: Implementation

Support for assisted dying is high across Britain - but this support is by no means unconditional. Both focus groups and polling make it clear that Britons will only support assisted dying legislation if they know the appropriate safeguards are in place to prevent abuse.

*I am tentatively for it (...) The only thing I would say is that the safeguards in place would have to be very, very tight and very secure because there are obviously ways to get around these things. But I'm for it as long as there is a safe way to make sure that the people who have decided to take this measure do it willingly, well not willingly, but do it as their choice rather than being pushed.*

**John, Oxfordshire**

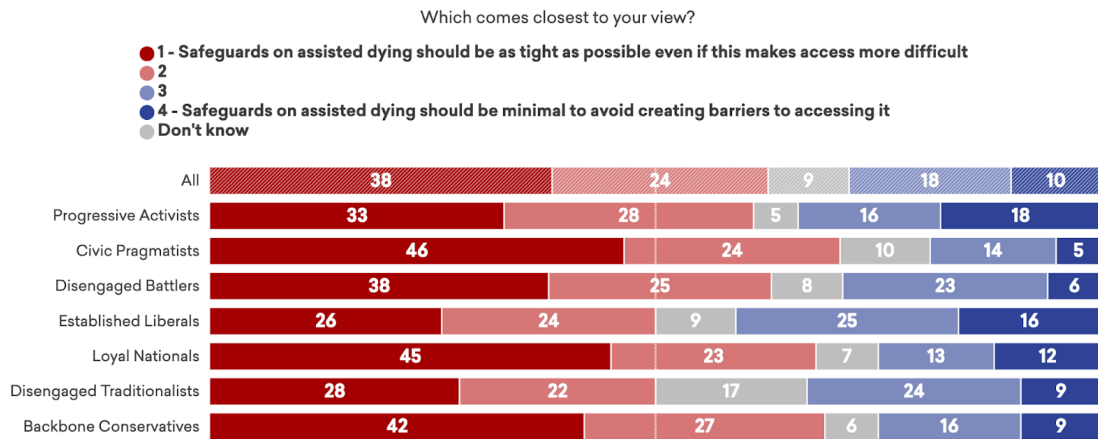
*I think if it's a very restrictive law, then it could possibly work, but it depends on what it's actually stipulating in what you can and can't do.*

**Jaspreet, Established Liberal, Maidenhead**

In making a trade-off between minimal safeguards and greater access to assisted dying, and more restrictive safeguards and less access, the public choose the latter by two to one - even among those who strongly support assisted dying. While the British public are keen to see assisted dying legalised, they do not want to take a risk on hastily-made policy with inadequate safeguards.

The premium placed on strong safeguards is strongest among Loyal Nationals and Civic Pragmatists. Loyal Nationals are themselves one of the segments most supportive of legislation - but their high threat perception makes them alert to the danger of poor safeguards. Civic Pragmatists are supportive of strong safeguards because in general they are keen to mitigate risks and unintended consequences of social change.

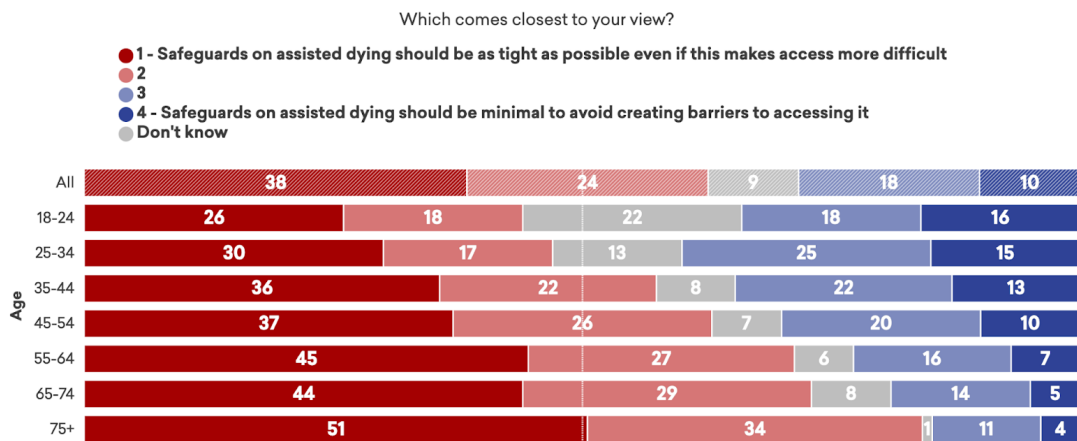
### Three in five prioritise safeguards over access



Source: More in Common • November 2024

Even though older Britons are in general more supportive of assisted dying than younger ones, they are also much more likely to say the priority should be tight safeguards above maximising access. Excluding those who say they don't know, 85 per cent of those aged 75 and above prioritise strong safeguards, compared to just 56 per cent of 18-24 year olds.

### Despite being the strongest supporters of assisted dying, older Britons are more likely to prioritise safeguards



Source: More in Common • November 2024

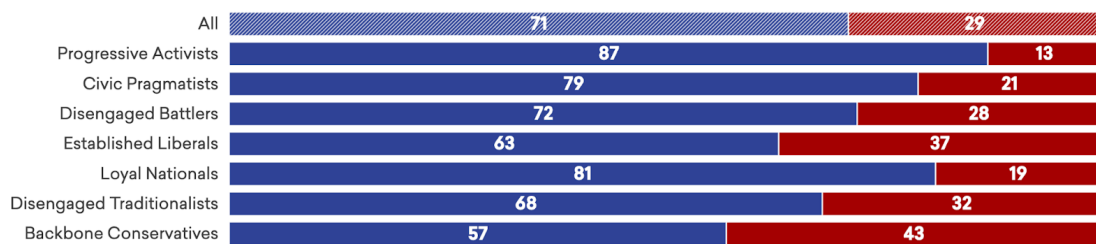
Despite their desire for strong safeguards, Britons do not see this as a reason not to move towards legalisation or avoid developing policy at all, nor are they pessimistic about the possibility of developing robust policy that has safeguards. 71 per cent of Britons say it is possible to design an assisted dying policy with adequate safeguards to protect vulnerable

people who might be pressured into ending their lives, while only 29 per cent think it is not possible.

## Most Britons think it is possible to design an assisted dying bill with the right safeguards in place

Which of these comes closest to your view?

- It is possible to design a system that allows those who are terminally ill to access support to end their own lives through assisted dying that also has adequate safeguards to protect vulnerable people from being pressured to end their own lives.
- It is not possible to design a system that allows those who are terminally ill to access support to end their own lives through assisted dying that also has adequate safeguards to protect vulnerable people from being pressured to end their own lives.



Source: More in Common • November 2024

This chapter considers the detail of what the public think that robust legislation might look like, drawing on polling and focus group discussions about who should be eligible for assisted dying, how it should be provided and what safeguards should be in place.

## Eligibility

*If you have a situation where you're having to rely on medication and you're suffering on a daily basis just because you're not necessarily by medical opinion going to die within six months or... But you're suffering every day... It shouldn't be forced to live on medication and forced to live, you know, in a way that you don't want to live.*

**Daniel, Progressive Activist, Dulwich**

*I think it should be about quality of life first and foremost. But at the same time, if you're not under current extreme suffering, there is the argument that there should be a strong span of time between the beginning of the process and the end of the process, as I mentioned before. Because people, people's outlook and people's, you know, views on their own life change a lot over the course of six months*

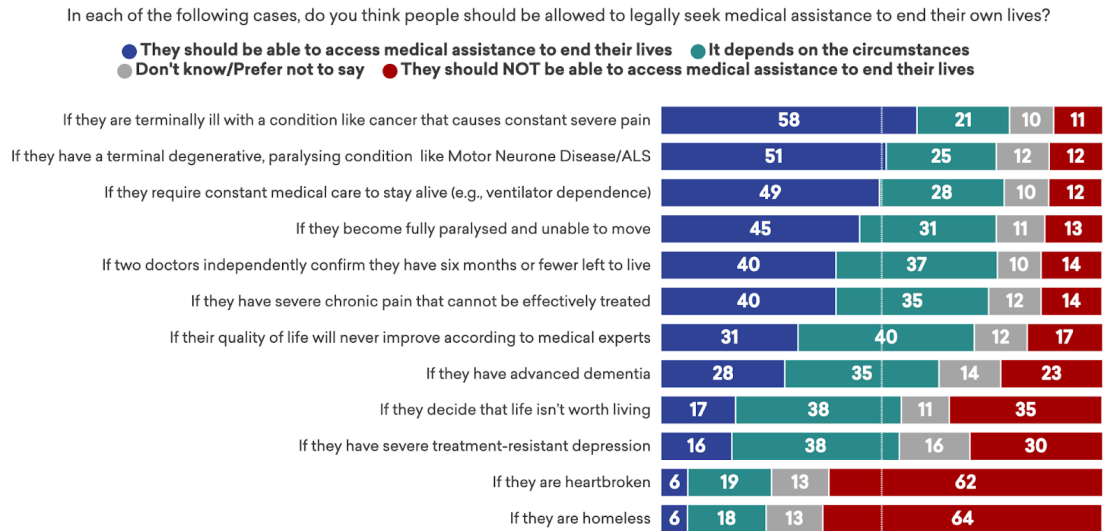
**Simon, Progressive Activist, Brighton**

Britons - whether they are in favour or against assisted dying - have a shared and clear view of who should be eligible and under which circumstances, were it to be made legal.

For those who have a terminal condition such as cancer or a degenerative terminal condition such as motor neurone disease, over half of the public agree they should definitely be eligible and a further 25 per cent think they should be eligible depending on circumstance. Only 12 per cent of the public think that those suffering with terminal

degenerative or terminal conditions causing lots of pain should not be able to seek help to end their own life.

### Britons' views on eligibility criteria for assisted dying



Source: More in Common • November 2024

Further down the list are conditions which are chronic conditions or forms of paralysis which can have severe debilitating impacts but are not necessarily terminal. For these conditions the public are less likely to support blanket access to assisted dying for those that want it and more likely to say that it should depend on the circumstances.

Dementia is perhaps the area where the public find themselves most torn. As the discussion on safeguards highlights, the principle of informed, clear consent matters immensely to the public when it comes to assisted dying. This is clearly not possible for patients with dementia.

However in focus groups Britons often reach for dementia and particularly their fear of changes to their personality as an example of a circumstance in which they would want to seek assisted dying for themselves. Some believe that the solution might be for those with dementia to sign some form of living will while they are still deemed to be mentally competent that allows them to access assisted dying as the condition progresses, others however felt that such an approach would be unworkable, not least given people wouldn't have an opportunity to change their mind.

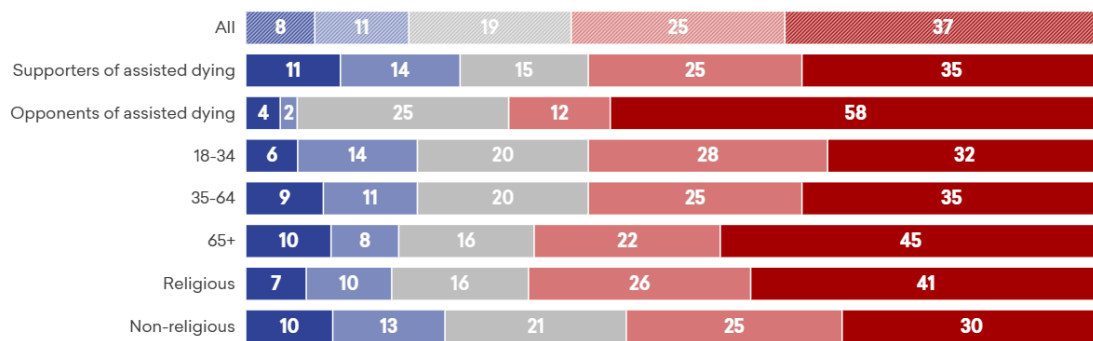
The public are much more resistant to the idea that those with mental health conditions such as treatment-resistant depression or who decide life isn't worth living should be eligible. For many Britons the idea of extending eligibility for assisted dying to those with potentially curable mental health conditions is a red line.

The conviction that suffering from a severe mental illness should not enable eligibility is widespread and is held even by some of the strongest supporters of assisted dying. It is also a view held by every age group, level of religiosity, and segment.

### Six in ten people oppose assisted dying for people with mental illnesses

Which of the following comes closest to your view?

- 1 - If someone is suffering from a severe mental illness they should be able to make a decision to end their life in some cases
- 2
- Don't know
- 3
- 4 - Nobody who is suffering from a severe mentally illness should be allowed to make a decision about ending their life



Source: More in Common • November 2024

This is not because the public do not view mental health issues as real or potentially debilitating. Attitudes to mental health have changed significantly in recent years and the public want to see the Government taking and resourcing mental health services seriously - two thirds of Britons are concerned about the NHS' mental health services and only one in five think the current mental health system is working.

However, they make three key distinctions between physical and mental illness in relation to assisted dying. First, and similar to their views on dementia, the public worry that having a severe mental illness in-and-of-itself makes it harder to guarantee that someone has the capacity to genuinely consent to end their lives. Second, Britons tend to conceptualise mental health conditions on a spectrum and tend to see mental health diagnoses as more subjective, presenting a further barrier to objective medical assessment. Finally, while there is an acceptance among the public that not all mental health conditions are curable, there is nonetheless a belief that mental health conditions have greater capacity for improvement than conditions like terminal cancer, especially when treatment options are adequately resourced.

A small minority - about one in five - do think assisted dying should be available to the mentally ill in specific circumstances. In focus group conversations some make the case that mental illnesses can be as painful and life limiting as physical conditions - and mental health drives many suicides. This minority viewpoint occasionally emerges in focus groups

with some participants gently challenging the distinction between physical and mental health.

*But then you get into the argument that says if somebody has the right to decide when they end their own life, who's to say whether physical pain is worse than mental pain? I can imagine a massive debate about it*

**Simon, Established Liberal, Maidenhead**

*So at the end of the day there's a lot of people who commit suicide because they can't take it no more... Because at the end of the day a mental health issue is the same sort of thing... You can't say to somebody who's got mental health no... You haven't got that capacity to do that because at the end of the day you don't know what they're going through*

**Sarah, Bridgend**

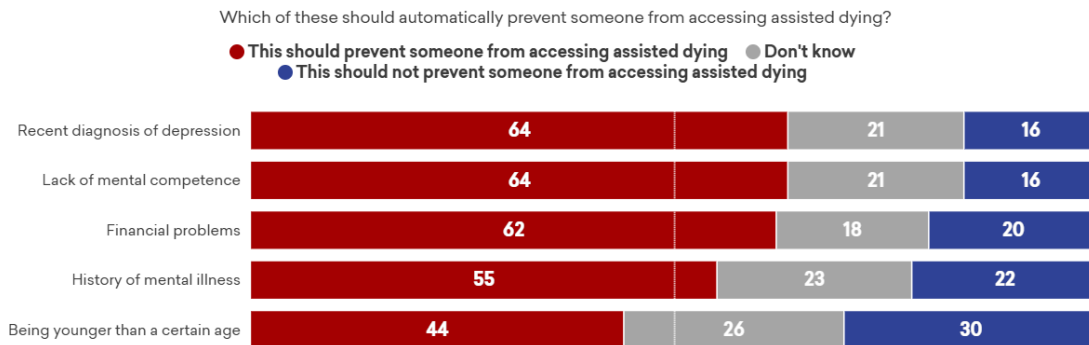
*I don't think mental health is curable. I think it's treatable. I think people can access the right treatments. I don't think there is enough funding at the moment into, you know, talking therapies. You know they give CBT as the first therapy and that's like six sessions and then they're passed on. So I actually think more money needs to go into funding the, you know, the treatment that will help people. But in terms of if someone has accessed lots of treatment, has been on lots of medication but is severely depressed, I don't see why that should be taken away from the list of things that is an incurable condition because it is incurable. They might have a good day every now and then but generally severe depression is not curable*

**Charlotte, Progressive Activist, Brighton**

In general the public do not believe that Parliament should be considering mental illness as an eligibility criteria for assisted dying. In fact the public would go further - and place a recent diagnosis of depression at the top of the the list of factors that Britons think should disqualify someone automatically from assisted dying. Two thirds of the public believe a recent diagnosis of depression should rule people out from accessing assisted dying. This is even higher for the group of the country who “*somewhat* support” assisted dying, where 68 per cent think it should rule out mental health as a criteria. Clearly reconciling this stipulation poses something of a challenge as those who have been diagnosed with a terminal condition are themselves particularly susceptible to depression.



## Public see mental health, competence and financial problems as bars to eligibility for assisted dying



Source: More in Common • November 2024

Clear majorities of Britons believe that ‘quality of life issues’ should not trigger eligibility for assisted dying - the public believe that being heartbroken or homeless should not be criteria for eligibility and safeguards should be put in place to prevent people who are experiencing hardship from seeing assisted dying as a potential ‘way out’. Here the public are particularly concerned that those in a difficult financial situation, or who are being told they are a financial burden on their family should also be deemed ineligible. Concerns about financial motivations for seeking assisted dying are raised in almost every focus group.

*The concern that I would have is about people who are coerced, so perhaps older people who have got family members that are saying, well, if you weren't here and we had your house, we'd have a much better life. We'd be able to provide much more for your grandchildren. And whilst I'm sure that would only be a very small amount of people that would do that, we know that surely there will be some people which would be awful.*

**Helen, Oxfordshire**

*But wouldn't that then be part of the safeguarding? So if them speaking to doctors and they unpick it and the reason why they're choosing this is because of financial reasons, it's not actually due to their quality of life, and that could be part of that safeguarding*

**Hayley, Brighton**

*I think just that whole family situation is rife with these issues, whether it is children who want to kind of move on with their lives and they. They know that this is something that's possibly already in a will. And then on the other side, the person who's elderly may feel they're a burden and they want to help their children, especially if they're in a difficult financial situation. So that wouldn't be given as an excuse at the time when they're applying for assisted dying. But I think. I don't know how you could safeguard against that in the background*

**James, Civic Pragmatist, Dulwich**

*Yeah. So I feel that end of life care will still be there, people still going to hospices and stuff, but just say if your family hasn't got much money, you might think it's a better option to end your life rather than your family have to pay for the hospice care. So the way I see it would be almost like legalised suicide. And I think some people would go for that as opposed to put their family through the burden of paying for them knowing that or thinking they're on the way out*

**David, Ilford**

Ensuring that assisted dying legislation contains proper and robust safeguards against coercion is vital for public confidence in the Bill.

### **Conditions not timelines**

Despite these specific criteria for eligibility most of the public do not believe it is possible to have a foolproof one size fits all rule that also contains adequate safeguards. Those in the Disengaged Battlers and Disengaged Traditionalists segments were most keen to emphasise the need to assess decisions on a case-by-case basis, with the possibility of a multi-disciplinary panel to make assessments.

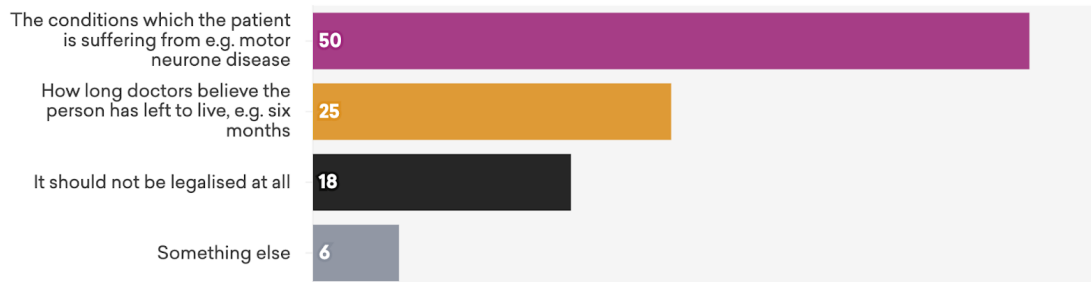
*So with people with disabilities, what often happens is you can't say where somebody can have an operation or anything. So they have an MDT (multi-disciplinary team) meeting, which would be people who are involved in their life involved, in their care. Advocates would be there as well. So there'd be a lot of different people from different agencies then who would all have an input into that*

**Rachel, Disengaged Battler, Bridgend**

Perhaps the biggest divergence between proposals set to be discussed in Parliament and public expectations is on defining the criteria for eligibility. The public are significantly more likely to support a system that determines eligibility based on the specific condition of a patient rather than how much time doctors have determined they have left to live. While the current Assisted Dying Bill only deems patients eligible if doctors determine they have six months left to live, the public would be more reassured by a policy that sets a strict and limited list of conditions for which patients would be eligible to seek assisted dying. Across the country, people are twice as likely to prefer a conditions-based measure of eligibility to one based on life expectancy.

## The public back an eligibility criteria based off conditions rather than life expectancy

If the UK were to legalise assisted dying, what do you think the criteria that should be used to decide whether someone is eligible to access help to end their own life should be?



Source: More in Common, November 2023

There are many reasons that a conditions-based eligibility criteria would be more reassuring to Britons than the proposed life expectancy criteria.

It is perhaps unsurprising, given human nature, that people are sceptical of a doctor telling a patient they only have a certain number of months left to live - with a tendency towards the hope inspired belief that people can 'beat the odds'. Many people have personal stories of a family member or loved one being diagnosed with a serious illness, only to live longer than they were initially told.

A conditions-based system is also one the public think can be more tightly controlled - with the process of deciding whether someone is eligible more transparent and consistent than relying on a judgement about life expectancy from a doctor. In a context of waning trust not just in politicians but across institutions, clear rules would help reassure the public that the approach to eligibility will be applied consistently and that decisions can be properly scrutinised both before and after they are made.

*If the doctor says six months, it could be six years*

**Andrew, Established Liberal, Maidenhead**

*We didn't know whether he was going to get better or if it would be longer than what they told him. So six months is too much of a wide brush to put on it.*

**Jaspreet, Established Liberal, Maidenhead**

*Yeah, I mean I've had a 30 year career in long-term neurological conditions, so I've had a lot of time to think about this (...) all of my family know that if I was ever diagnosed with something like motor neurone disease or whatever, I will be over to Switzerland getting me a plan in place*

**Helen, Oxfordshire**

## Provision

While Britons tend to have clear views about who should and should not be eligible for assisted dying, they have spent less time considering how assisted dying should be provided.

In focus groups conversations Britons do not take a single view of whether it would be better for the NHS, private companies, or a new government agency to provide assisted dying in Britain.

Some worry that the involvement of private companies would lead to a lack of affordability, or a 'postcode lottery' in provision. On the other hand, some were concerned that providing assisted dying as a public service would put additional strain on the NHS.

*It's too rushed. I mean, how would this service be provided? Who would it be provided by? Would it be an NHS service? Do you have to go private? In which case some people won't be able to afford it anyway. What's the route?*

**Peter, Established Liberal, Maidenhead**

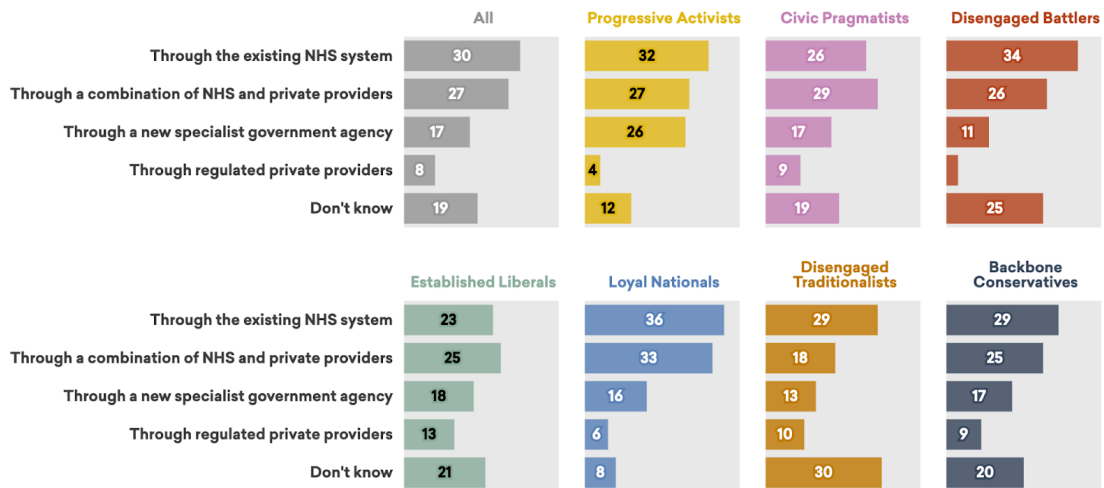
*You know, we all know the NHS is really struggling as it is, you know, so you add an extra service in that. They've got to facilitate as well. They're not going to manage it. And then it becomes a waiting list game*

**Laura, Established Liberal, Maidenhead**

The NHS is the most popular institution in the UK, and Britons are deeply sceptical of privatisation, so it is no surprise that the largest group of people say that the NHS would be in the best position to provide an assisted dying service. But some of the public also hold concerns that the nature of the NHS would change if it began to provide services to end - rather than prolong - peoples' lives. These concerns are particularly acute in relation to the nature of the doctor-patient relationship.

## Public's views on how assisted dying might be provided

Which of these comes closest to your view about how assisted dying should be provided?



Source: More in Common • November 2024

Across the country, 30 per cent say that assisted dying should be provided by the NHS if it were legalised. A similar number (27 per cent) say it should be provided by a mix of NHS and private services. Smaller proportions (17 and eight per cent respectively) think it should be provided by a new government agency or private companies only.

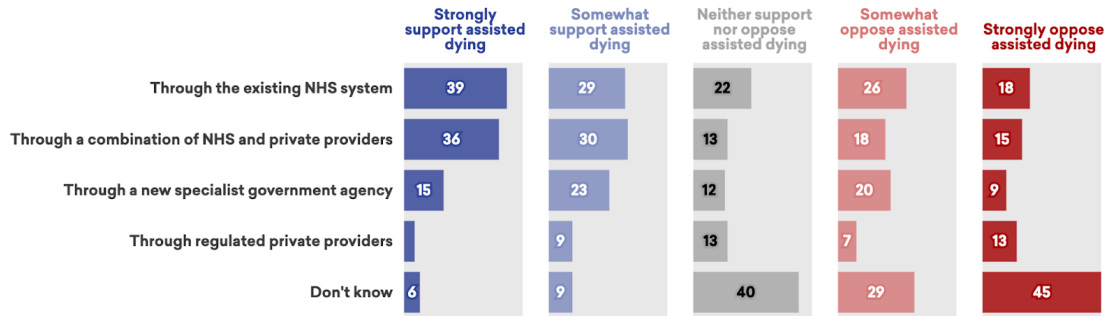
Unsurprisingly given their favourable views towards private healthcare in general, Established Liberals are the most supportive of private provision for assisted dying. Progressive Activists are more likely to back the establishment of a new government agency. Strong supporters of assisted dying are the most likely to think it should be provided solely by the NHS, whereas softer supporters would prefer a mix of public and private options. Those opposed to assisted dying are more positive about private options in general - possibly because they have greater opposition to the idea of the state becoming directly involved in ending people's lives.

*It should be one umbrella where everybody gets it, regardless of wealth, regardless of poverty. It should all be the same umbrella, if you get what I mean. Not just to be NHS or private, where if you've got the money, go and pay private - if you haven't, you're going to have to wait 18 months or whatever for this to happen*

**Edward, Established Liberal, Maidenhead**

## Those who support assisted dying more strongly are more likely to back an NHS-delivery model

Which of these comes closest to your view about how assisted dying should be provided?



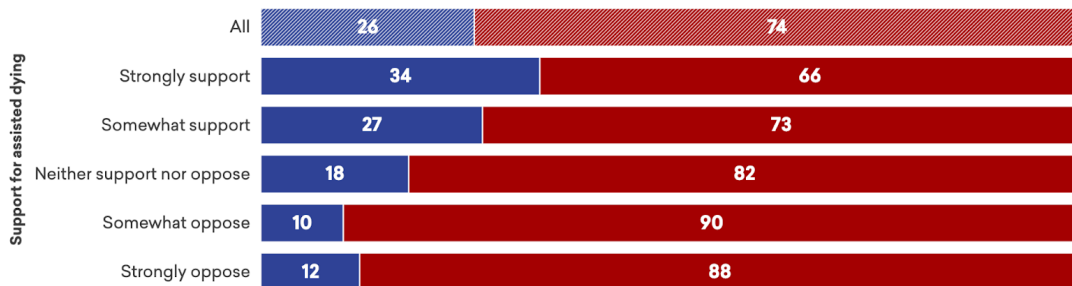
Source: More in Common • November 2024

One inevitable challenge surrounding the provision of assisted dying services is the state of the NHS. While a plurality want assisted dying to be provided by the NHS, and 62 per cent trust the NHS to make the right decisions about who should be able to receive help to end their life, 74 per cent of the country think that the NHS is currently not in a fit state to provide people with the option of assisted dying and only 26 per cent think it is. Even among those who support assisted dying, 69 per cent think the NHS is not currently in a fit state to provide it at the moment.

## Three quarters think the NHS is not in a fit state to provide assisted dying

Which of these comes closest to your view?

- The NHS is currently in a fit state to provide people with the option of assisted dying.
- The NHS is currently not in a fit state to provide people with the option of assisted dying.



Source: More in Common • November 2024

This creates a complex challenge for policymakers. They must balance the public's desire for NHS oversight with legitimate concerns about the service's capacity. Simply legislating for NHS provision without addressing these underlying concerns risks undermining public confidence in the entire system. Policymakers therefore face several decisions: whether to

delay implementation until the NHS is better resourced, whether to create new specialised units within the NHS, or whether to explore alternative delivery models that maintain NHS oversight while reducing pressure on existing services. Whatever path is chosen, rebuilding public confidence in the NHS's capacity to deliver this and to deliver it well must be a key priority before any assisted dying service can be successfully implemented.

*Yeah, it's like the NHS should be for everybody. So this should be for everybody as well, in my opinion. Some people cannot afford to do that and they should not be not allowed to do it because of financial constraints*

**Clare, Progressive Activist, Brighton**

*We all know the NHS is really struggling as it is, so you add an extra service in that they've got to facilitate as well. They're not going to manage it and then it becomes a waiting list game.*

**Laura, Established Liberal, Maidenhead**

*Obviously we touched on the NHS. They're woefully underfunded at the minute. So it's going to be the same situation with assisted dying. You're going to have no medical professionals there to assist this*

**Edward, Established Liberal, Maidenhead**

Among critics of assisted dying legalisation, a common concern is that it would divert political focus from end-of-life care, resulting in a lack of funding and improvement for palliative services.

In general, the public are more likely than not to reject this dichotomy: 56 per cent believe that it is possible to introduce assisted dying without detracting from the quality of palliative care. Additionally, only 11 per cent of people list concern about the country's palliative care system as the most convincing argument against assisted dying.

*It's just like saying, well there's crash helmets out now so people don't get as bad head injuries, so we're not going to bother dealing with head injuries anymore*

**Luke, Disengaged Traditionalist, Bridgend**

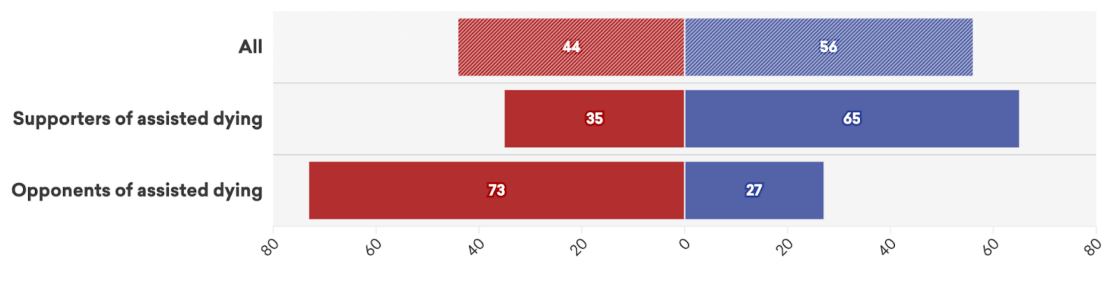
*I think the end of life care will just carry on as it is because there'll be so many people who won't want to do this and it'll only be those few people with degenerative conditions. I think everyone else will still carry on with the same end of life care*

**Susan, Ilford**

## Public more likely than not to think assisted dying will not detract from palliative care services

Which of the following comes closest to your view?

- Introducing assisted dying WOULD detract from improving palliative, end-of-life care such as hospices or new pain treatments
- Introducing assisted dying WOULD NOT detract from improving palliative end of life care such as hospices or new pain treatments.



Source: More in Common • November 2024

However, the resonance of this concern is far more widespread among opponents of assisted dying, 73 per cent believe that assisted dying would detract from palliative care services. In focus groups those opposed to assisted dying tend not to raise neglect of palliative care as a reason for their opposition organically, but did express that concern when prompted.

*As I've said before, the whole Pandora's box opens. What's the purpose of having end of life care now? Why spend all these resources when we can spend resources on something better?*

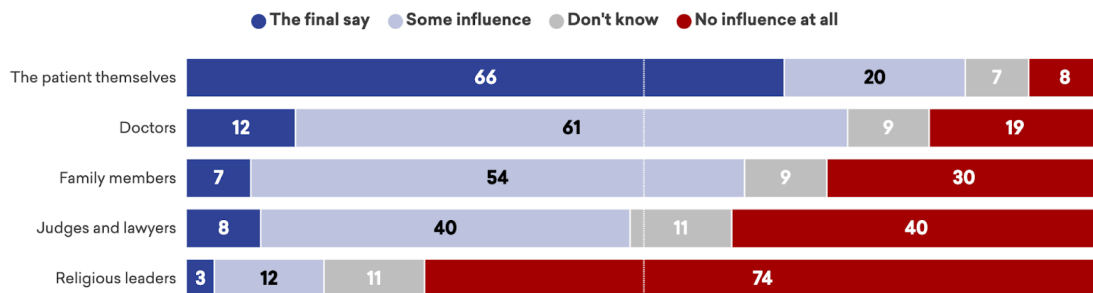
**Omar, Ilford**

Unsurprisingly the public are clear that the patient should be able to have the final say on assisted dying even if all of the safeguards have been met, hence the public's unease at allowing people to pursue assisted dying if they are not in a fit mental state or unable to clearly express their views.



## Public see patients as the key group who should have the final say on assisted dying in the UK

If severely ill people were allowed to seek assisted dying in the UK, how much influence should each of the following have in any particular decision?



Source: More in Common • November 2024

Two thirds of Britons say that the patients themselves need to have the final say in decision-making - far more than say consideration should be given to any other figure. While people tend to believe doctors, family and judges should have some, but not the final say. Three quarters of the country also say that religious leaders should have no influence at all on decision-making - this includes 50 per cent of people who say religion is very or somewhat important in their lives.

### Safeguards

Even more than ensuring that there are tight eligibility criteria for assisted dying and appropriate provision, safeguards matter. The public have real concerns about the risks that legalising assisted dying would pose to those who are vulnerable.

The public's support for legalisation is entirely contingent on strict safeguards being in place to mitigate those risks as much as is possible - even if the public do not believe they cannot be removed entirely.

*I think the big problem, as often is with almost any law, is how do you protect the vulnerable who get convinced into maybe making decisions before they're ready to make them*

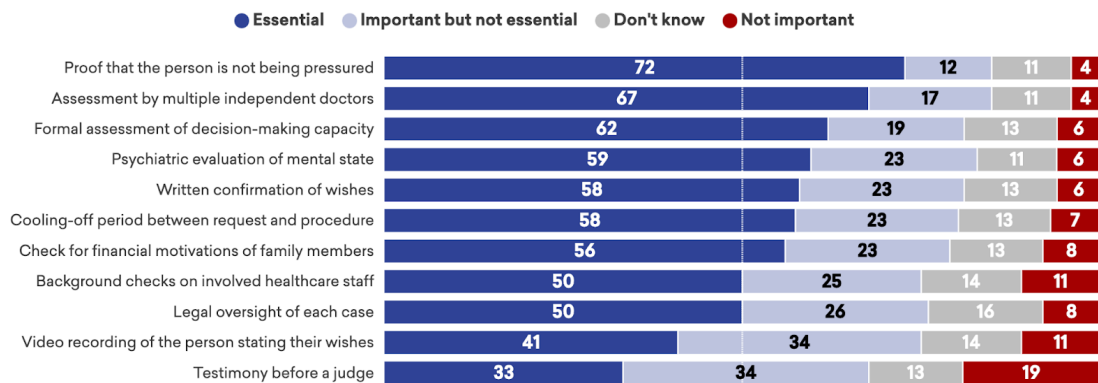
**Simon, Established Liberal, Maidenhead**

*I think that in terms of safeguarding, one must make sure that the person hasn't been coerced in any way and that the person must have the opportunity to have some fairly decent counselling beforehand as well*

**Clare, Progressive Activist, Brighton**

## Strong support for assisted dying is contingent on robust safeguards

If assisted dying were to become legal, how important to you would each of these potential safeguards be?



Source: More in Common • November 2024

The most important safeguard for the public is that there is some form of proof that the person seeking assisted dying is not being pressured. 72 percent of Britons believe that proof is an essential safeguard. It's also an issue that was raised time and again in focus group conversations. However participants had little to offer in terms of suggestions on what that proof might look like and for some participants, reflecting on the difficulty of proving that someone had not been pressured.

*I'm sure not everything's black and white here. There will be ways people manipulate and take advantage of elderly people or people who are vulnerable and that's what scares me about it*

**Zain, Loyal National, Spenn Valley**

*When it has come to possibly a parent passing away and the assets being shared, it can become very contentious - it's a very contentious issue that often breaks up families. And so you get to realise that some people, as their loved ones are nearing the end stage they want it to hurry up, they want their kind of share*

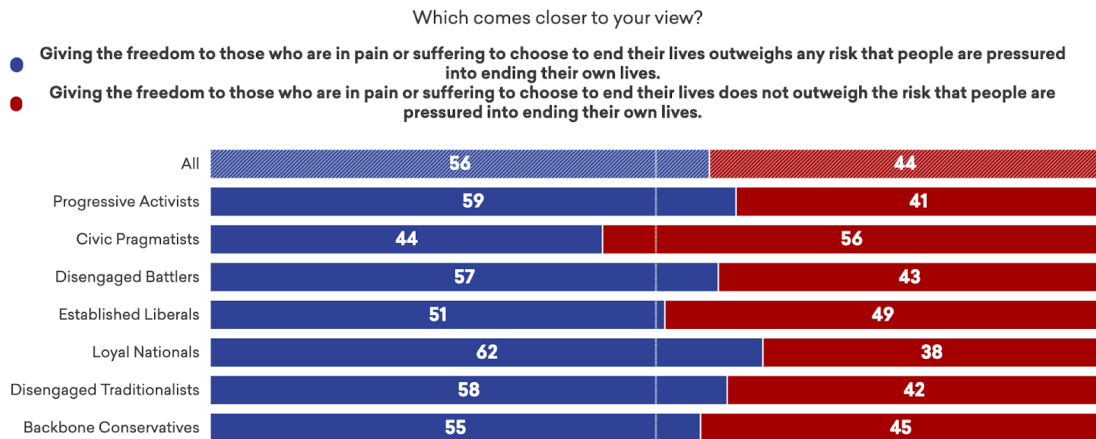
**James, Dulwich**

*As it's been mentioned multiple times, people that want to profiteer or, you know, they want these people to die so they inherit something. How do you protect them from that?*

**Tom, Civic Pragmatist, Dulwich**

Despite that concern, the public are 12 points more likely to think giving people the choice to choose to end their lives outweighs the risk that people might be pressured into doing so. This holds across every segment apart from Civic Pragmatists, who tend to have a lower tolerance for risk in public policy.

## For a majority, giving people the choice to end their lives outweighs the risk of being pressured to do so



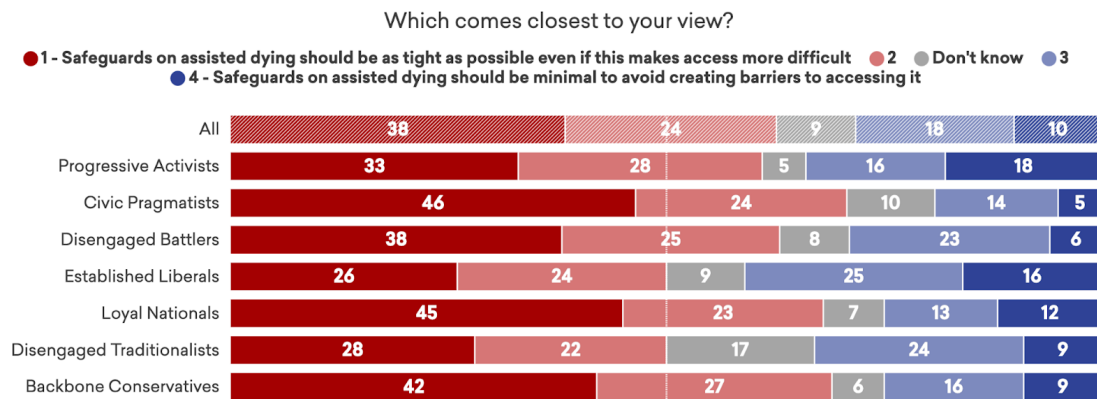
Source: More in Common • November 2024

Beyond coercion there are a series of further safeguards that the majority of the public think should sit alongside assisted dying if it is legalised. That includes assessment by multiple doctors, something that is already part of the proposed Assisted Dying Bill. Other public expectations are aligned with safeguards covered in the proposed Bill, such as a formal assessment of decision-making capability, a psychiatric evaluation of a patient’s mental state and a written confirmation of the patient’s wishes.

However in addition to what is proposed in the Bill a majority (56 per cent) think it essential that checks are carried out to determine whether family members could have financial motivations to pressure a relative to seek assisted dying and a further 23 per cent think that is important if not essential. Having some form of background check on potential financial motivations for seeking assisted dying would bolster public confidence in the proposals. However, only a third of Britons think that testimony in front of a judge is an essential safeguard.

Support for strong safeguards is high across most groups of Britons. As might be expected, those opposed to assisted dying are particularly likely to say that the safeguards should be essential, but support for many of the safeguards is actually highest among those who strongly support legalising assisted dying. This suggests that high levels of support for assisted dying in Britain should not be confused with a belief that assisted dying should be legalised at any cost: those Britons who support legalising assisted dying are also the clearest that appropriate safeguards need to be in place.

## Public prioritise safeguards even if it restricts accessibility



Source: More in Common • November 2024

The views that people have in support of specific safeguards on assisted dying are deeply intertwined with their own personal experiences.

For example, despite the fact that those who have lost a parent in the past five years are more supportive than average of legalising assisted dying, they are also more concerned about family members encouraging elderly relatives to seek assisted dying for financial reasons. As such, they are the most likely to support background checks to rule out potential financial coercion. Similarly, people who have had a family member diagnosed with terminal illness are much more likely to say that assessment by multiple independent doctors should be a requirement for anyone wishing to access assisted dying to end their life.

In summary, high levels of support for assisted dying in Britain should not be equated with lack of concern for safeguards, or unconditional support for implementation. In fact, public support is predicated on strong safeguards being put into place, and tight eligibility requirements. The public would rather have a Bill that determines eligibility based on a patient's medical condition, rather than how long they have left to live, as proposed in the current Bill. Britons also tend to want to rule out the possibility for anyone to pursue assisted dying as a result of mental illness, or due to financial hardship (either personally or from family pressure). And they want strong safeguards in place to ensure that these eligibility requirements are strictly maintained. This will necessarily mean excluding a great many categories of people who would desperately like to seek medical help to end their own lives - including those with dementia related conditions and those with severe mental illnesses or who are paralysed.

The public are optimistic about the possibility of writing such complex legislation, but the ability for lawmakers to produce watertight policy that will maintain the public's trust

## Proceeding with Caution

depends in no small part on the process used to produce the policy, and the extent to which the public feel they and other experts are involved - the subject of the next chapter.

## Chapter 4: The Private Members Bill and processes of change

While public support for the principle of legalising assisted dying is clear, the way in which any legislation is discussed, debated and scrutinised is also important for building and maintaining public trust in the proposals and the decision that Parliament arrives at.

For the legislation to command confidence the bill process needs to demonstrate to the public that their concerns have been heard and carefully considered, particularly given the gravity of the changes being proposed. Rushing through legislation without proper scrutiny or expert input could undermine confidence in the safeguards and protections that the public expect to be in place. Conversely if Parliament rejects the Bill, potentially stalling the proposal for a further decade without the public feeling the issue has been properly considered and their voices heard, it could equally undermine faith in politics.

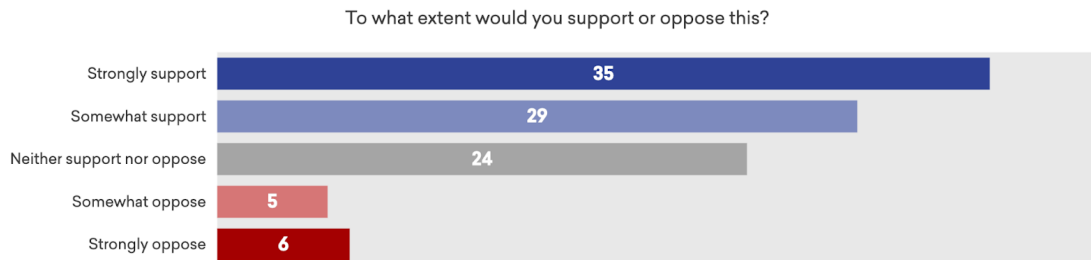
Instead if the assisted dying Bill passes second reading, thought needs to be given to how the Committee and Report stages can best ensure a range of voices are heard and concerns considered.

Many Britons - whether they support or oppose the proposals - feel they have been excluded from the debate on assisted dying. For a change of this magnitude - one that touches on fundamental questions about life and death, and the role of the medical system in death - the public expects thorough consultation and careful deliberation. They want reassurance that politicians are genuinely listening to their concerns rather than simply rushing to vote one way or another. They also want adequate time to be taken to get the details right. The way the debate is conducted and legislation is developed will be crucial in securing long-term public trust in Parliament's decision and, if assisted dying is legalised, in the system that is put in place. This chapter explores what the parliamentary process - and wider public debate around the bill - should look like in order to give the public confidence in Parliament's eventual decision.

## The Assisted Dying Bill

### Two thirds of Britons support the Assisted Dying Bill; only eleven per cent oppose

A bill is currently being introduced into Parliament which would allow terminally ill adults with six months or fewer left to live, to seek and to receive medical help from doctors to end their own lives. The request would have to be approved by two doctors and a judge, and the person making the request would have to be judged to be mentally competent to make the decision.



Source: More in Common • November 2024

Presented with the key elements of the Assisted Dying Bill that MPs will vote on, the public support the Bill by a margin of 64 per cent to 11 per cent. The margin of support for the Bill mirrors the public's general support for the principle of the legalisation of assisted dying. However for many people this was the first time that they became aware of the Bill's specifics, and for a significant minority the first time they became aware a Bill was being discussed at all.

## Awareness and consultation

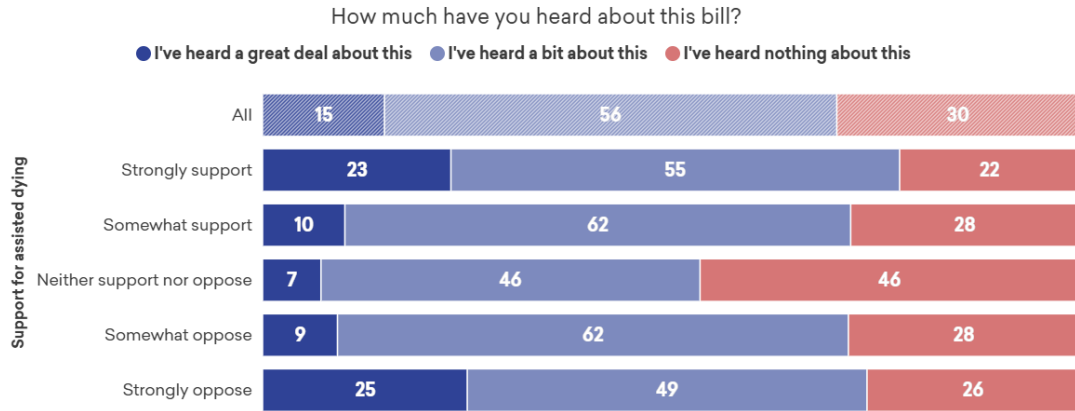
In spite of the significant social change that would accompany the legalisation of assisted dying, many Britons are not even aware that the debate is currently happening in Parliament, and some feel that they have been excluded from the debate that politicians are just having with each other.

*We need to have TV debates. [...] with] experts in their field. Psychologists, doctors, members of Parliament, people with experience of, of going through the process. Those, those that like what, what's her name? Esther Rantzen. She seems to be quite vocal advocate at the moment*

**Peter, Established Liberal, Maidenhead**

Three in ten Britons say they have heard nothing about the Bill currently in Parliament, and a further 56 per cent say they have only heard a bit. While people who are unsure on the question of legalisation are the most likely not to have heard of the Bill, more than a fifth of people with strong views for or against assisted dying also say they have not heard that a bill is set to be debated.

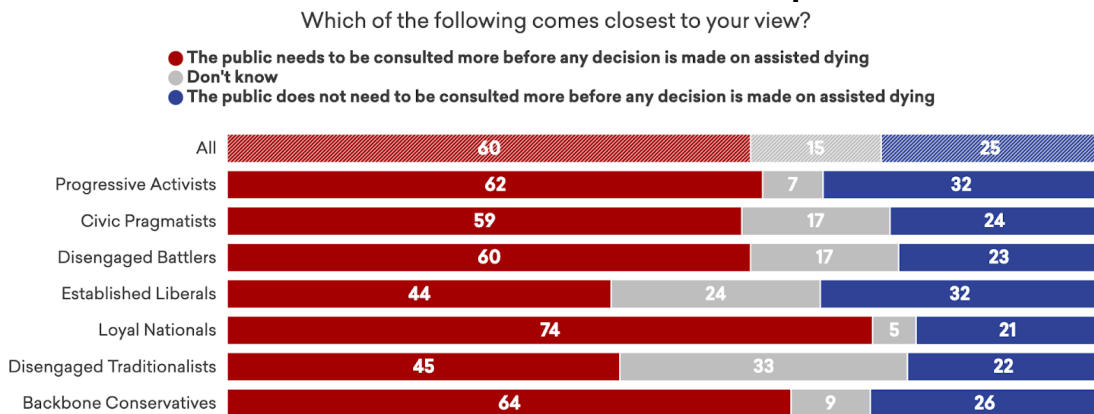
## One in three people have heard nothing about the Assisted Dying Bill



Source: More in Common • November 2024

Given that lack of awareness, it is no surprise that the public do not feel they have been properly consulted on the proposals. 60 per cent say that the public needs to be consulted more before any decision is made on assisted dying, compared to only a quarter who say the public has been consulted enough already. Interestingly, supporters of assisted dying are actually more likely to support deeper public consultation, perhaps due to their strong desire that adequate safeguards are put in place and that Parliament properly considers their position. Loyal Nationals - the largest segment and one of particular political importance - are also far more likely to say the Bill needs greater consultation, with 74 per cent expressing this view.

## Three in five Britons think there needs to be more public consultation



Source: More in Common • November 2024

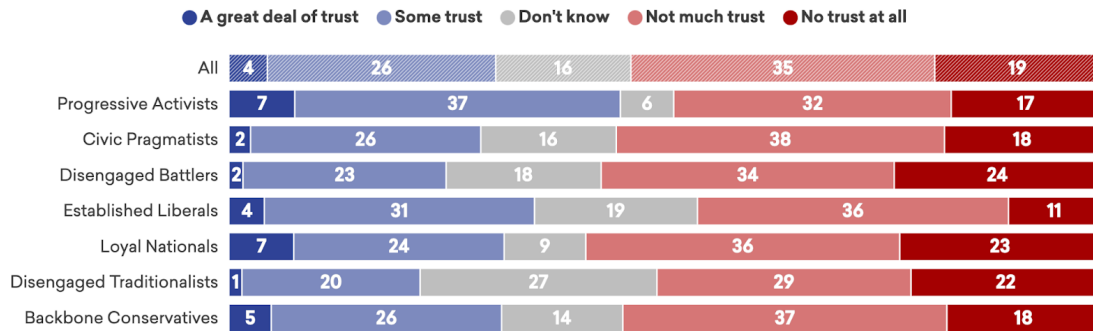
Consultation is important because trust in politicians and policymakers is extremely low. Currently, only 31 per cent of the public trust politicians to make the right decision on assisted dying and 54 per cent do not trust them. These numbers are concerning, not



because they undermine or support the case for assisted dying, but because they highlight the vital need to build confidence in whichever decision politicians come to.

### Only three in ten people trust MPs to make this decision

How much do you trust Members of Parliament to make the right decision about assisted dying?



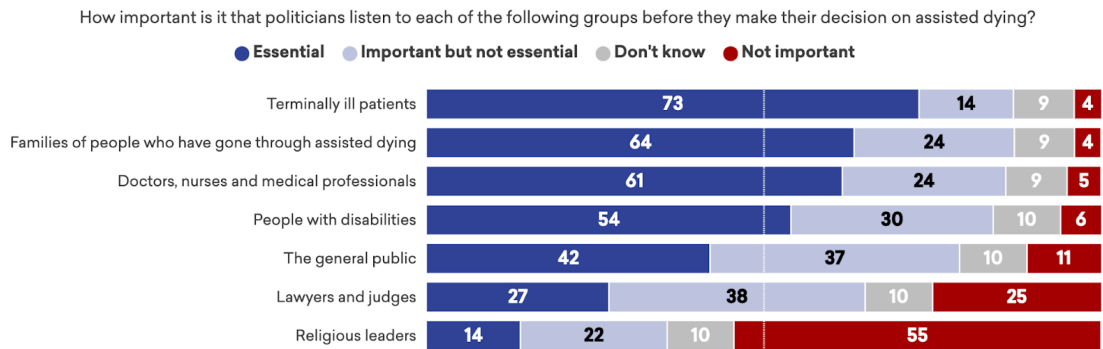
Source: More in Common • November 2024

The stakes are particularly high because controversies are inevitable. Should assisted dying be legalised, there will undoubtedly be high-profile cases where decisions are questioned and it is possible that there may be potential miscarriages which are scrutinised. In these moments, public confidence in the system will depend heavily on whether people believe the original legislation was developed through genuine consultation and careful deliberation, rather than being rushed through by politicians. If politicians cannot demonstrate that they followed a thorough and inclusive process, each controversy will not only undermine trust in assisted dying safeguards, but further erode public faith in politicians' ability to manage significant social changes.

On the flip side, if Parliament rejects legislation on an issue that commands significant public support, without the public feeling that the issue was properly considered or that they were able to have their say, the same erosion of trust is likely to occur. This is especially true since it has taken a decade for legislation to be introduced since the last time assisted dying was brought forward and voted down in Parliament. If the legislation is rejected, Parliament needs to be able to show it has been properly considered.

Asked how the consultation on assisted dying legislation should be carried out, the public have nuanced views about whose voices matter most. While there are clear demands for thorough consultation, they believe politicians should prioritise listening to those with direct experience: terminally ill patients and families who have navigated end-of-life care or assisted dying abroad.

## Broad public expectations for wider consultation



Source: More in Common • November 2024

Interestingly, while Britons want their representatives to engage in proper consultation, they place less importance on the voice of the general public than those who might be directly affected. Less than half (42 per cent) say it is essential for politicians to consider the views of the general public when making their decision, though a further 37 per cent see it as important, but not essential. This suggests that Britons value expertise born from personal and professional experience over broader public opinion on such a sensitive and complex issue.

At the same time, the public see a limited role for religious leaders in the consultation process - a majority (55 per cent) saying it is not important for politicians to listen to their views, though for 14 per cent of Britons such consultation with religious leaders is essential. Notably, only 29 per cent of people of faith say it is essential for religious leaders to be heard in these discussions. This reflects Britain's increasingly secular approach to legislation and social change and the fact that many of those who identify as religious view end-of-life decisions for others as matters of personal choice rather than religious doctrine.

The responsibility for enabling and fostering public debate on assisted dying goes beyond Westminster. In a functioning democracy, a range of institutions play roles in facilitating discussion of major social changes. The fact that 30 per cent of Britons have not heard about the current Bill suggests concerning gaps not just in political consultation, but in our broader civic infrastructure.

Public broadcasters, particularly the BBC, have a special responsibility to host informed debate on issues of national importance. While assisted dying has featured in news coverage and documentaries, there is scope for more systematic engagement such as through Question Time style events and debates that have been held on issues such as Brexit, which would help more Britons engage better with the arguments for and against the proposed legislation.

Local institutions also have important roles to play. Town halls, libraries, and museums could be creating spaces for communities to engage with these difficult questions in accessible ways. These organisations may have avoided engaging in the debate because of the sensitive nature of the subject matter - but the sensitivities and importance of the topic are if anything more of a reason for civic institutions to facilitate discussion and debate.

This void in public debates may help explain why, despite high levels of support for assisted dying in principle, many Britons feel disconnected from the current legislative process. While politicians must ultimately make decisions about the law, sustainable social change requires broader institutional engagement to build public understanding and trust.

## Politics and process

Given the public desire for greater consultation and the scale of this change, it is reasonable to ask whether the public would rather the decision on assisted dying be made through a referendum rather than a Parliamentary vote.

In focus groups, people have varied opinions about the idea of a nationwide vote, but tend to think a referendum would do more harm than good. Many are still scarred by the divisions of the Brexit debate and would not want to turn a currently apolitical issue into a potentially heated, divisive row. Many also say that the issue is too complex to be reduced into a simple referendum question. At the same time, other participants - particularly those who are generally more politically engaged - are much more supportive of holding a referendum, thinking it would give any changes in law greater credibility.

*Yeah, I don't think it's a topic for a referendum because you're gonna just get people voting on something that's, you know, as Dominic said, it's never going to impact them*

**Tom, Civic Pragmatist, Dulwich**

*I'm a pragmatic person and yeah, like, quiet backbench stuff is often the best way to get stuff done. I mean, that was a major factor in LGBT rights As well. Like a lot of it is just quiet politics as usual. Sometimes that is the best answer. And as Dominic says, this is a. This is something that's only going to ever affect a small number of people. So. Yeah, like why. Yeah, why do we need the confusion and, yeah negative feeling that would come with, like, a referendum*

**Simon, Progressive Activist, Brighton**

*However, not everybody is educated enough to understand what they're voting for, so it could become a bit of a problem because I'm sure we've had referendums before where people have voted because they like the sound of one aspect of that referendum, but not actually considered how it's going to impact the rest of the*

*country (...) maybe educate people more on it before they start the referendum. I would say.*

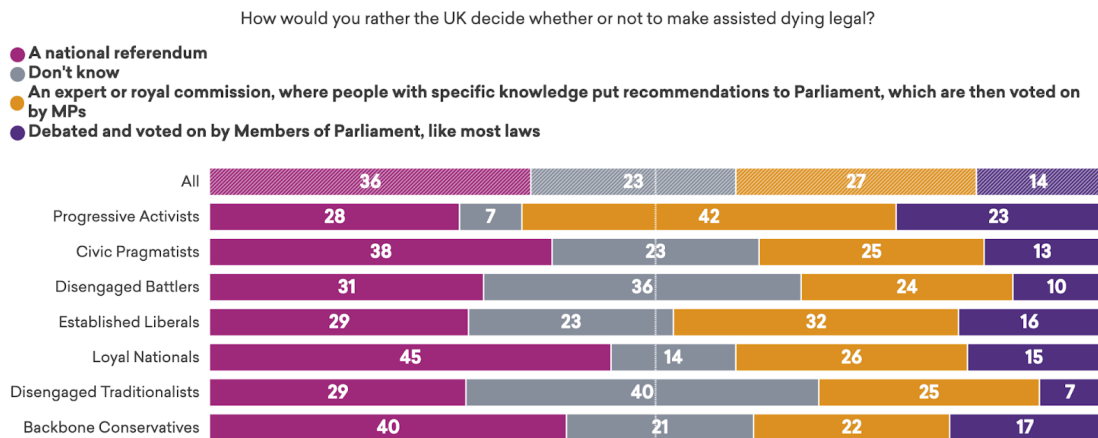
**Olivia, Loyal National, Spen Valley**

*I believe this way that there should be a wider consultation because of the reason that people would be having both sort of views, agreement and disagreement. And there should be more opportunities to know about which statement or which scenario is more popular and how to deal the other side of the people. And some more arguments would be coming onto the surface level that we may not be aware of.*

**Ibrahim, Civic Pragmatist, Brighton**

Polling finds that just over a third think a referendum would be the best option, compared to 41 per cent who think that a Parliamentary process is the right way to decide whether assisted dying should be legalised.

### Public torn on how the UK should decide whether or not to make assisted dying legal



Source: More in Common • November 2024

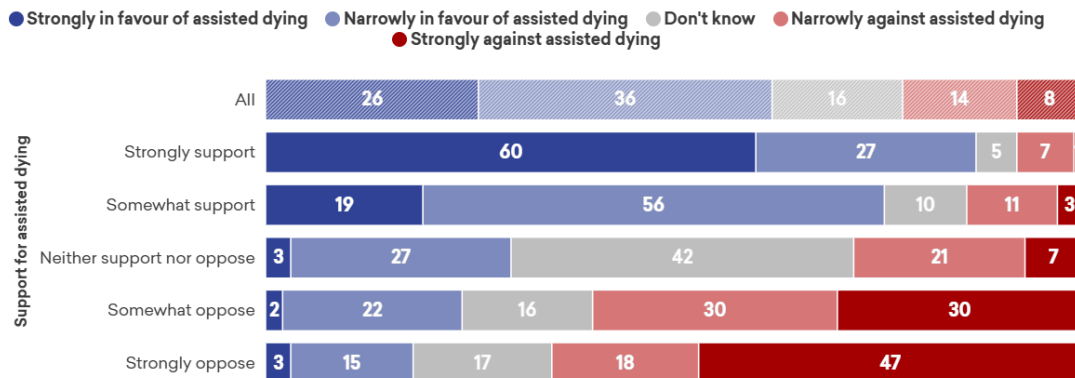
Loyal Nationals, with their strong preference for public input and distrust in political representatives, are most in favour of a referendum. In contrast, high-trust Established Liberals and highly engaged Progressive Activists are much more likely to support a Parliamentary vote.

Fear that a referendum would produce the wrong outcome does not motivate opposition to holding one. 62 per cent of Britons think a national referendum would result in a vote in favour of assisted dying, but both supporters and opponents of assisted dying tend to believe their own side would win a referendum: 88 per cent of supporters expect a 'yes' vote and 72 per cent of opponents expect a 'no' vote. This "optimism bias" on both sides means that fear of 'losing' isn't informing people's views on whether a referendum should be held, since most people believe their preferred outcome would prevail anyway.

## Most people think that their position on assisted dying would win in a referendum

How do you think Britain would vote in a referendum with the following question:

Should Britain allow terminally ill adults with six months or fewer left to live, who have satisfied two doctors and a judge they are medically competent, be able to seek and to receive medical help from doctors to end their own lives?



Source: More in Common • November 2024

The truth, however, is that a referendum on assisted dying - were it held today - would result in a comfortable win for the 'yes' side. Our polling suggests that as many as 85 per cent of the public with a view on the proposals support them, though of course public opinion would likely change one way or another during a referendum campaign.

Because the public wants politicians to listen more to experts and those with lived experience of terminal illness before making a decision, a Royal or Expert Commission is more popular than a straight parliamentary vote on this issue, with people twice as likely to list this as their preferred option.

In focus group conversations people tended to think an Expert Commission would be helpful in ensuring that any policy introduced is watertight, protecting it from having to be rolled-back in a number of years. Some however, were more impatient for the Assisted Dying Bill to pass and thought a Commission would be an unnecessary burden and slow the process down too much in the face of clear popular support.

*Yeah, I mean, if they've got all the information, then do it now. All I'm saying is don't delay it. If you can do it sooner with all the information*

**Laura, Established Liberal, Maidenhead**

*I think it would be. It'd be appropriate. And the fact that it's taken two, three years is a good thing because it's something that's been considered properly*

**Rebecca, Established Liberal, Maidenhead**

*Who makes somebody an expert on this one? Yeah. It's your right. You can make that decision*

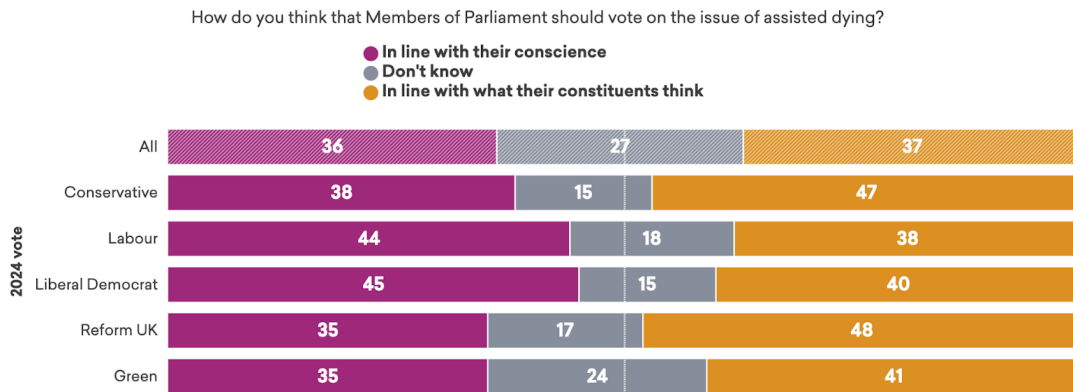
**Adrian, Disengaged Traditionalist, Bridgend**

*You know, it feels like there's a lot more research needed and a lot more data gathered from other countries and where they have got it legalised and what the impact has been, what the volumes have been. I mean, for me, it sounds like, I mean, if this bill was kind of targeted at very, very specific cases where there is a clear, there is a clear argument for doing it and all avenues have been explored because, I mean, I think even the, you know, the illnesses that get worse and worse, in my mind, you know, you've got six months. What if some, what if there's some kind of medical breakthrough in the meantime and all it takes is just to take a pill. So I'm not being funny here, but that, you know, then you've actually lost that person's life because they could have had a chance and now they've lost it. So, so for me, I think there's a lot more, a lot more research needs to be done, a lot more scientific data gathered and, and, you know, and like you say, you know, what are the, what are the illnesses that are, you know, definitive and degenerate and, you know, you can categorise them and it's not just kind of, you know, the cancer that we're talking about, if we are talking about cancer, but other things, you know, maybe very specific cases that do warrant that*

**Beryl, Disengaged Battler, Ilford**

Regardless of whether the public would have preferred a Royal Commission or referendum on assisted dying, Members of Parliament will have to vote on the current Private Members Bill this week. The public are split on whether MPs should approach that vote by voting with their conscience or in line with what their constituents think. Labour and Liberal Democrat voters are more likely to want MPs to vote in line with their conscience and Conservative and Reform voters are slightly more likely to want their MPs to back whatever their constituents want. Women are also more likely to want MPs to vote with their conscience, compared to men who would prefer them to vote in line with their constituents.

## Public split on what should guide MPs voting in the Assisted Dying Bill



Source: More in Common • November 2024

As highlighted, there are only seven constituencies in the country where fewer than half want to legalise assisted dying (East Ham, Ilford South, Clapham and Brixton Hill, Birmingham Ladywood, Poplar and Limehouse, Brent West, Brent East), and no constituencies where opponents outnumber supporters. But public opinion should not be the only factor MPs consider when making their decision. There are many examples of where politicians have been able to lead rather than follow public opinion on moral issues - for example, capital punishment in the UK was outlawed at a time when roughly 80 per cent of Britons supported the death penalty.

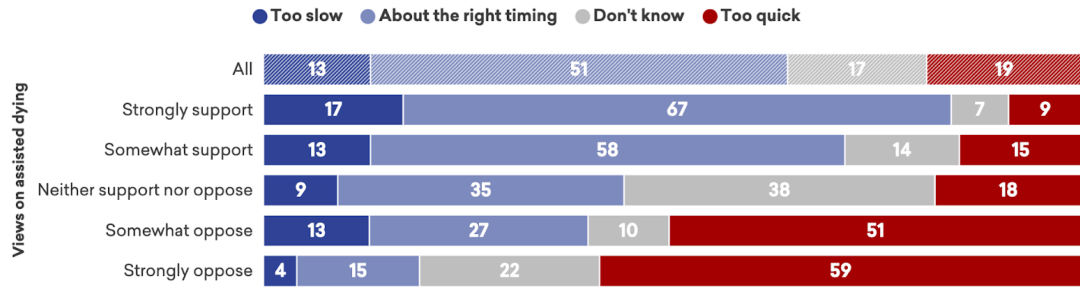
What is clear, however, is that whatever decision MPs make, they need to demonstrate that they have properly engaged with the complex arguments on both sides, listened to those with relevant expertise and experience and carefully considered the implementation challenges that could undermine public trust in the system.

The way the assisted dying debate has unfolded so far falls short of these expectations. With 30 per cent of the public unaware that the debate is even happening in Parliament, and 60 per cent believing that more consultation is needed. There are also some concerns about whether a Private Members Bill is the right vehicle for such a significant social change, but overall Britons don't express a particular preference for a Government Bill above a Private Members Bill.

While support for assisted dying is high across Britain, that support is contingent on proper safeguards being in place and a proper, if efficient, process being followed. Pursuing legislation without adequate consultation risks undermining public confidence in the entire system. This does not mean pushing this legislation into the long grass; most think that the current timing of the vote is about right and see no contradiction between consulting properly on assisted dying and taking a final decision on the Bill quickly.

## Most Britons think the Assisted Dying Bill is progressing at the right speed

The bill to legalise assisted dying in certain circumstances was introduced to Parliament on the 16th of October this year. The bill will be debated and voted on in Parliament on the 29th of November. Do you think this is...



Source: More in Common • November 2024

For the future progress of this Bill, should it receive a second reading, it is important to strike the right balance. On the one hand, there is a clear public appetite for change, with supporters of assisted dying eager to see progress after decades of debate. On the other hand, the public - including many strong supporters - want to ensure the process is done properly, with proper scrutiny and consultation - even if they don't want to slow down the timetable. The challenge for parliamentarians is to find a way to maintain momentum while still demonstrating they are taking the time to get the details right. Whether through an Expert Commission, enhanced parliamentary scrutiny through more Government time, or other means of consultation. The process matters as much as the outcome for building and maintaining public trust in whatever system emerges.



## Conclusion and recommendations

Support for the principle of legalising assisted dying in Britain spans broad social groups and has persisted for so long that it is to some degree surprising that it is only now that legalisation looks like a possibility. Looking at the headline support for assisted dying is hard to conclude anything other than that the public think it is time to move towards legalisation.

That support in principle does not however mean that the legislative process should be rushed or slapdash, in fact the opposite is true. The public's support for legalisation is conditional on the implementation of strong safeguards that are robustly enforced. The current Bill includes many of these provisions, but there are certain instances where the Bill does not yet meet the public's expectations.

The public do not think enough consultation has taken place or enough account has been taken of expert opinion - the Bill's Committee stage will be a key moment to address these gaps. There are also other instances where some members of the public would like to see assisted dying made accessible to more members of the public than those currently eligible in the Bill - listening to this group, while also balancing the demand for tight safeguards will be an important and difficult challenge.

Furthermore, there are real uncertainties about how assisted dying will or should be administered in Britain. Supporting the NHS is one of the public's most important priorities and three quarters of Britons think that the NHS is not currently in a fit state to provide the option of assisted dying. Any pathway to implementation must demonstrate how it will avoid the possibility that routine NHS operations are significantly affected.

In the face of this and other complexities, politicians should not avoid the subject of assisted dying. The public appreciate the challenges in designing a bill that balances the demand for safeguards with people's freedom to end their lives if they choose, but ultimately think it should be possible to do so.

The first step in building public trust in any assisted dying legislation is **getting the process right**. That so many of the public have not heard about the Bill proposing such a substantial change is concerning. If the Bill is passed or rejected without the public having confidence in the process of scrutiny and consideration it will further entrench Britons' lack of trust in the political process.

A robust, thoughtful and transparent process is not simply a means to better policy, but a prerequisite for building trust in the final decision. The research points to a number of clear recommendations for what getting the process right should look like in practice:

- **The Bill should receive a second reading and further debate and scrutiny at Committee stage** - given strong public support for the principle of assisted dying, it seems most appropriate, given the need for Parliament to demonstrate that it takes seriously the wishes of their constituents, to allow the Bill to pass to Committee stage where the details can be debated more finely and the draft refined. The public will only support a bill that has appropriate safeguards in place. After the Bill's Committee stage, Members of Parliament will be best able to judge whether the proposals meet their constituents' expectations. This is not a recommendation on how MPs should vote at Committee, Report or Third Reading when the issues and complexities of the Bill have been more thoroughly explored, tested and debated.
- **Regardless of the outcome of the vote on second reading this should not mark the end for debates about assisted dying in Britain** - If the Bill receives a second reading more work is needed in Committee and Report stage to bring it in line with public expectations on safeguards. If this Bill is voted down it will not change the public's support for the principle of assisted dying and it would be a failure of our political institutions if they were to long-grass the issue for another decade.
- **Use the next stages of legislation well** - The Bill as drafted could be improved to bring it more in line with public expectations. Members of the Bill Committee should not be afraid to pursue these amendments and ensure the Bill is as watertight as possible before it reaches Report stage. There will also, no doubt, be a key role for the House of Lords should the Bill pass to the second chamber. The expertise of the House of Lords and the greater flexibility in their timetable should be an opportunity to provide the additional layers of scrutiny and challenge.
- **In order to enable proper scrutiny more Government Parliamentary time should be given to future stages of debate** - While the public do not necessarily want assisted dying legalisation to happen on a slower time frame, they do want it to be properly debated. Assisted dying legislation in the Victoria State Parliament received over 100 hours of debate, whereas the vote for Bill in Britain is only scheduled for 5 hours of debate this week. The Government has a crowded legislative agenda of its own but, given the nature and importance of this debate, more time should be set aside for the Bill to be debated and scrutinised.
- **Listen more, and to the right people** - The public want to know that policymakers have listened to the right people in making up their minds on assisted dying, and this does not necessarily mean a general public consultation. Instead, the public are particularly keen for politicians to hear from those with direct experience of family members who have used assisted dying abroad, those who are terminally ill, and people with expertise in end of life care. This sort of consultation should take

place through expert witnesses during the Committee stage, but MPs should also ensure they listen to their constituents with particular personal experiences.

- **Widening the debate is not just the role of politicians, our civic institutions should do more to engage the public** - Given the significant implications of this legislation, there is much more that our public broadcasters, such as the BBC, and civic institutions, such as museums and town halls, could be doing to foster debate and engage the public with such a significant piece of legislation.

While thorough Parliamentary scrutiny and engagement is important in its own right to legitimising Parliament's ultimate decision, it is even more important that if the Bill passes, the safeguarding regime meets public expectations. MPs and peers should use the Committee stage to ensure that these safeguards match the public's expectations. The public's preferences give some idea as to what **getting the policy right** might look like:

- **Consider determining eligibility by a list of conditions, rather than life expectancy** - The public are more likely to support an approach whereby people are eligible for assisted dying if they are diagnosed with certain conditions, rather than if they are told by medical professionals that they have only a few months left to live. While the process of defining which conditions should be included on this list will be fraught, creating such a list, which would necessarily need to be tightly drawn, would reassure the public about safeguards.
- **Consider introducing more stringent checks into the financial motivations that could lead to coercion** - Among the top concerns of the public are that family members might be financially incentivised to coerce vulnerable relatives into seeking assisted dying. While the proposed Bill does make coercion an offence, there are no specific requirements for checks into the financial circumstances of those who could financially gain from assisted dying. While it is important not to intrude on the lives of families as they are undergoing such a difficult period, conducting these checks as standard may help prevent the worst case scenarios that many Britons worry about.

Finally, were the Bill to become law, more needs to be done to ensure the implementation guards against outcomes that would undermine public confidence and that this is properly monitored. **Getting the implementation right** means listening to public concerns about how the bill might affect the NHS and palliative care:

- **Ensure the rollout of the Bill is continuously reviewed and monitored** - The Bill's provisions for annual reviews by the Chief Medical Officer, and a review in Parliament after five years continuous review and monitoring, are essential to ensure that the Bill's implementation meets the public's expectations that safeguards are adequate. It is paramount that the future stages of parliamentary scrutiny consider how these monitoring requirements could be strengthened.

- **Properly resource the NHS to deliver assisted dying and high quality palliative care** - Supporting the NHS is a top public concern, any legislation passed in this Parliament should be targeted at helping the NHS recover, rather than adding further burdens that aren't properly resourced. While the public don't accept the argument that legalising assisted dying will mean attention is taken away from palliative care, it is clear that end-of-life care in Britain needs much more support, regardless of whether assisted dying is legalised and the Government should make this a priority should the Bill pass.

## Methodology

**Polling for this report was conducted by More in Common between 9th-11th November, of 2,111 people representative of Great British adults.**

**The MRP uses data from 7th July to 27th August 2024, N = 9,652**

Additional polling for background research was conducted on the following dates:

- 5th-7th October 2024; N = 2,023
- 16th-19th August 2024; N = 2,083
- 24th-27th August 2024; N = 2,015
- 7th-11th July 2024; N = 9,300

More in Common is a member of the British Polling Council and abides by their rules.

**Focus groups for this report were conducted online with participants from the following constituencies and areas:**

- 21st October: Oxfordshire
- 29th October: Maidenhead
- 29th October: Spen Valley
- 30th October: Ilford
- 11th November: Dulwich and West Norwood; Brighton Pavilion; Brighton Kemp Town
- 11th November: Bridgend

To protect their anonymity, focus group participant names have been replaced with pseudonyms.

