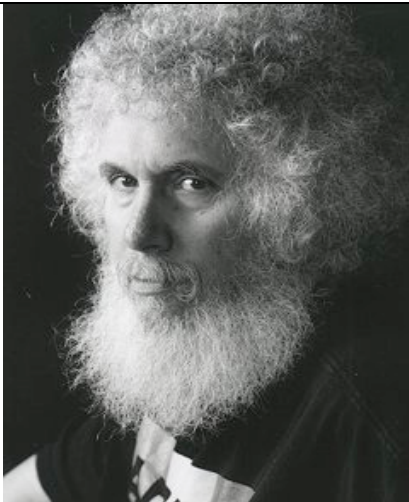
	<p>All of the national disability rights organizations that have taken a position on assisted suicide oppose legalizing it in public policy. The following are statements by LEADERS OF THE DISABILITY RIGHTS MOVEMENT.</p>
<p><i>The Resistance</i></p>	



Bob Kafka, ADAPT

National Disability Organizations That Oppose Legalization of Assisted Suicide

ADAPT

American Assn. of People with Disabilities
Association of Programs for Rural
Independent Living

Autistic Self Advocacy Network

Disability Rights Center

Disability Rights Education & Defense Fund
Justice For All

National Council on Disability

National Council on Independent Living

National Spinal Cord Injury Association

Not Dead Yet

TASH

The Arc of the United States

United Spinal Association

Seniors and people with disabilities who need assistance to do everyday tasks like dressing and bathing want the choice to get those services at home and to have control over how the services are delivered. They do not want to be forced into a nursing facility, nor see themselves and their spouse, and sometimes their children, forced to live in poverty to qualify for help with such basics. Unfortunately, that choice is not a reality for most. In states which have legalized assisted suicide, according to data from Oregon, over a third of those who request assistance to die do so because of “feelings of being a burden” and over 90% cite “loss of autonomy” as a factor. If the only alternative to death that those in power offer people who require assistance is poverty and segregation in nursing facilities, then it makes no sense to talk about assisted suicide as a “choice”. Society is failing to ensure that seniors and people with disabilities have access to consumer controlled long term services and supports when they need them. The last thing we need is for those in power to make a public policy choice, during this time of vast budget cuts in Medicaid health and long term care, that an early death is the cost saving answer to these very real human needs.

As a person with a disability and a wheelchair-user, I'm proud that the disability community has overwhelmingly opposed the legalization of assisted suicide. It's a deadly mix with our broken, profit-driven health care system, where financial pressures already play far too great a role. Direct coercion is not even necessary. If insurers deny, or even merely delay, approval of expensive, life-giving treatments, patients will, in effect, be steered toward assisted suicide, if it is legal.

Contrary to the claims of its supporters, it would radically decrease, not increase, individual self-determination, due to the significant risk of abuse. It poses substantial danger to people with disabilities and many other people in vulnerable circumstances. For example, people with depression are given lethal drugs in Oregon, despite the claims of proponents that this condition disqualifies a person. Elder abuse is a growing but still largely unreported reality that threatens to pressure seniors toward an early death. Moreover, the supposed safeguards in the Oregon and Washington State laws don't really protect patients. If one's doctor refuses lethal drugs, the patient or family can—and do—simply shop for another doctor. And nothing in the law can protect patients when family pressures, financial or emotional, distort patient choice.



Marilyn Golden
Senior Policy Analyst
Disability Rights
Education & Defense
Fund



Kelly Buckland
Executive Director
National Council on
Independent Living

Our society places a high value on physical appearance and ability and at the same time really stigmatizes significant disability. It's no surprise that those of us who grew up able-bodied and then became disabled initially might see disability as a huge loss of dignity and self identity. We understand what it means to deal with issues like the loss of one's former dreams as well as the loss of physical abilities. When someone is first hit with this, they may spend time feeling that they'd be better off dead. Even later, as the struggles to get basic needs met pile up, some people feel worn down. I understand.

If assisted suicide had been legal in the past, even if it were supposedly only for those with "terminal" conditions, many of us would not be here today. I might not be here today, and I'm grateful that assisted suicide was not legal back then, and I'm committed to keeping it that way. This is an important reason why the National Council on Independent Living opposes the legalization of assisted suicide. NCIL is a leader in the disability rights movement, our political struggle for equal rights. And, among other things, equal rights includes equal suicide prevention.

There is significant evidence that proponents of physician assisted suicide have never intended to stop at the terminally ill. Legislation introduced in New Hampshire in 2009 would have adopted a definition of terminal illness so broad as to allow for a lethal prescription in response to any condition which shortens lifespan without a known treatment – even if the individual in question might have years or even decades of life remaining. Or take the case of Tracy Latimer, a 12-year old Canadian girl with significant developmental disabilities who was murdered by her father. Following the father's conviction for second-degree murder, the executive director of the Toronto chapter of Dying with Dignity announced that their position was that he should serve no sentence, as "the Latimers had already lived under a sentence during the 12 years that Tracy was alive." Assisted suicide advocates have been adept at using an incremental strategy by focusing on people who are terminally ill, but their broader policy agenda is already well documented.



Ari Ne'eman
Founder
Autistic Self
Advocacy
Network