

Exploring public views on assisted dying

Survey 1 – February 2024



Summary

A majority of the public demonstrate a good understanding of assisted dying

- When asked to describe their understanding of assisted dying (before being provided with any information on the topic), a majority of respondents alighted on principles such as ending life with lethal drugs in the context of terminal illness for adults and offering individuals choice and dignity at the end of life.
- After providing their own descriptions of assisted dying, four in five of respondents correctly identified the definitions of assisted dying that were included amongst a group of seven statements about end-of-life care.

However, confusion exists with other end of life practices

- Almost two in five (39%) thought that withdrawing life support from an adult patient who cannot survive without it was assisted dying. Similarly, 28% of respondents thought that adult patients who are dying and who exercise their right to refuse life-prolonging treatment is assisted dying.

Most of the public have engaged with the topic in the previous 12 months

- A majority (59%) had seen, heard or read about the subject of assisted dying during the previous 12 months. News media is the most common way in which the public have engaged with this subject.

A majority of the public in England agree assisted dying should be legal

- Approaching seven in ten people in England (69%) agree that assisted dying should be legal in England; 15% either strongly or somewhat disagree; and 17% either did not know, or neither agreed nor disagreed.
- When considering terminal illness, seven in ten (71%) support the option of a patient being prescribed lethal drugs to self-administer. Support for these lethal drugs being administered by a health professional has marginally less support (67%).

Support for assisted dying for those who are suffering intolerably but do not have a terminal illness is lower

- When considering non-terminal physical illness, support for the option of a patient being prescribed or administered lethal drugs is lower than for terminal illness at 63% and 60%, vs. 71% and 67%, respectively.
- When considering mental illness, the prospect of a healthcare professional prescribing or administering lethal drugs is only supported by a minority (38% and 37%).

Most of the public support healthcare professionals being involved in the process

- Three-quarters (74%) say they would support healthcare professionals always being involved in the process if assisted dying was legalised in England.

Death and assisted dying is something most (but not all) people feel comfortable talking about

Opinions on assisted dying differ based on age, religious views, and ethnicity

- While a majority feel comfortable talking about assisted dying (66%) and death more generally (70%), for around 1 in 8 (15% about assisted dying, 13% about death more generally) this subject is challenging to speak about, even with their immediate social network.
 - Muslim respondents find talking about assisted dying with close friends or family particularly difficult (37%).
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- Those who are younger, particularly younger and from ethnic minorities, are less supportive of assisted dying. For example, those who are aged 18-24 (63%), aged 25-34 (57%), Black (40%), Asian/Asian British (49%), Muslim (26%), and those from an ethnic minority and aged 18-24 (50%) and 25-34 (42%) are all less supportive of assisted dying.
 - Analysis of responses by ethnicity shows that those who are Asian or Black are less positive about assisted dying than those who identify as White. However, there is a likely interlinkage with age here. For example, those who are Black (40%) and Asian/Asian British (49%) are all less likely to support assisted dying vs those who are White (74%). 18-24 year olds who are non-white (50%) are less likely to support assisted dying vs those who are white (70%). 25-34 year olds who are non-white (42%) are less likely to support assisted dying vs those who are white (65%).
 - Those who are Muslim (26%) are notably less likely to agree with assisted dying being made legal than those with no religion/atheists (80%).

Understanding of assisted dying

As an entry point to the survey's subject matter, respondents were asked what they understood the term 'assisted dying' to mean. This was ahead of being given the definition of assisted dying to understand respondents' spontaneous understanding of the topic.

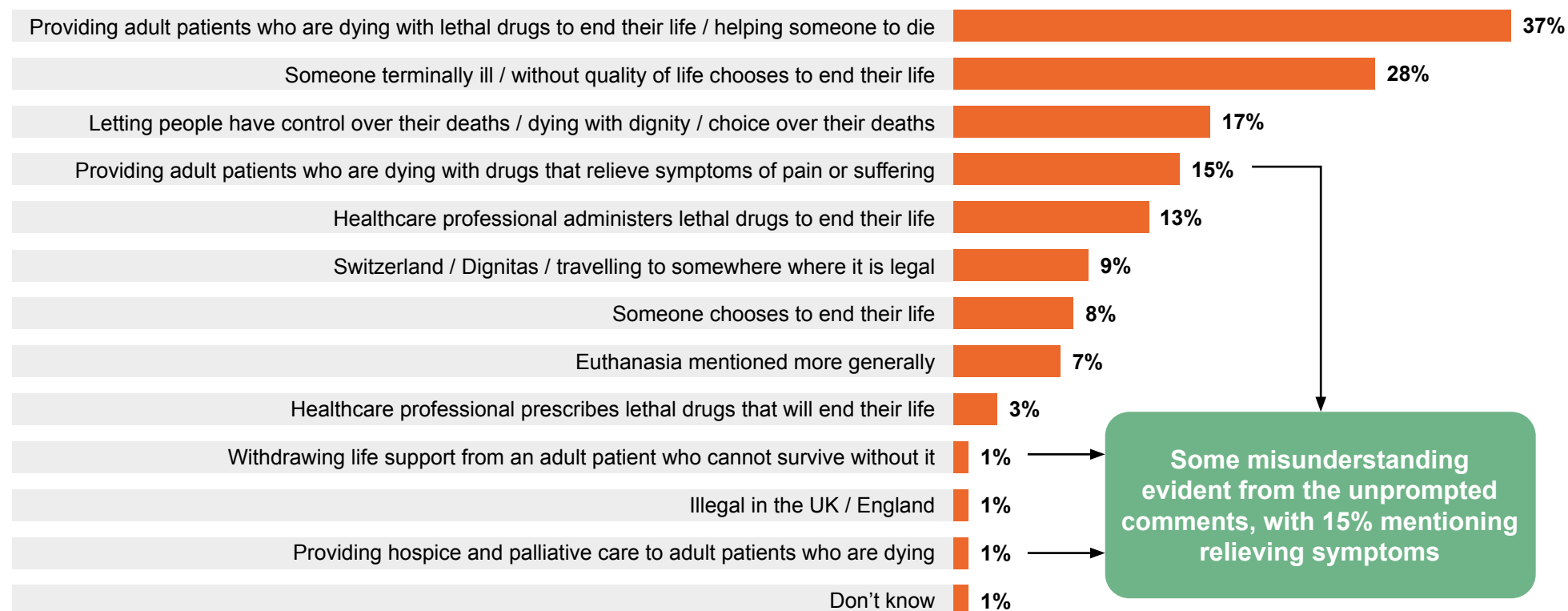
The responses were text based so that the participants could use their own words. These responses provide useful insight into the language used by the public regarding this issue and the key points of debate.

When the text responses provided are grouped by theme this shows strong understanding of what assisted dying is from the participants, with only a small number mentioning relieving symptoms instead.

Spontaneous understanding of assisted dying

A1. Thinking about the term 'assisted dying', what do you understand this to mean?

Unweighted sample base: 2031



Examples of comments given...

Examples of comments given by respondents about helping someone to die.

Spontaneous understanding of assisted dying

37% Providing adult patients who are dying with lethal drugs to end their life / helping someone to die

It probably in my eyes means helping someone to die with some form of technology or medicine can be anything that helps them to die in peace.

Helping someone to commit suicide/to kill themselves/doing it on their behalf with their permission.

When someone is given medical to enable them to die, usually because they have a terminal illness that they do not wish to suffer through.

When someone who is terminally ill gets someone to take their life for them to spare them the agony of dying from their illness.

Examples of comments given by respondents about someone terminally ill / without quality of life choosing to die.

Spontaneous understanding of assisted dying

28% Someone terminally ill / without quality of life chooses to end their life

When your quality of life is so awful and you are in your right mind, to be able to choose to die.

I understand it as accelerating the dying process, for example, if someone is experiencing unbearable pain and has very slow chance of survival, assisted dying could mean that doctors can let person or their family to choose death to end the suffering.

It means giving the affected person the right to choose to die and receiving the help needed to do so.

Under medical supervision you can choose to end your life under certain circumstances.

Examples of comments given by respondents about people having control over their deaths.

Spontaneous understanding of assisted dying

17% Letting people have control over their deaths / dying with dignity / choice over their deaths

Assisted dying allows a dying person the choice to control their death if they decide their suffering is unbearable.

I think it is when people who are very ill with capacity to make an informed decision want to end their life in a controlled way to end the pain and suffering that their illness may bring.

Compassionate help to assist someone, with a terminal illness, to allow them to control their own death when living becomes unbearable.

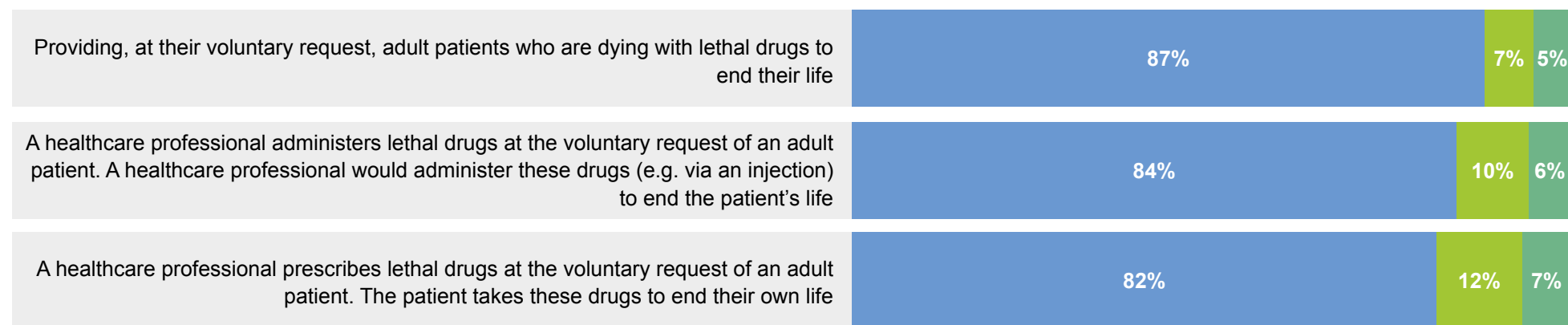
It's providing people a safe and controlled medical option to end their life. Especially for the elderly or those with medical conditions that no longer allows for a peaceful existence.

Four in five of the population in England correctly identified the definitions of assisted dying that were included amongst a group of seven statements about end-of-life care.

Understanding of assisted dying (1)

A2. Which of these statements do you think means 'assisted dying'?

Unweighted sample base: 2031



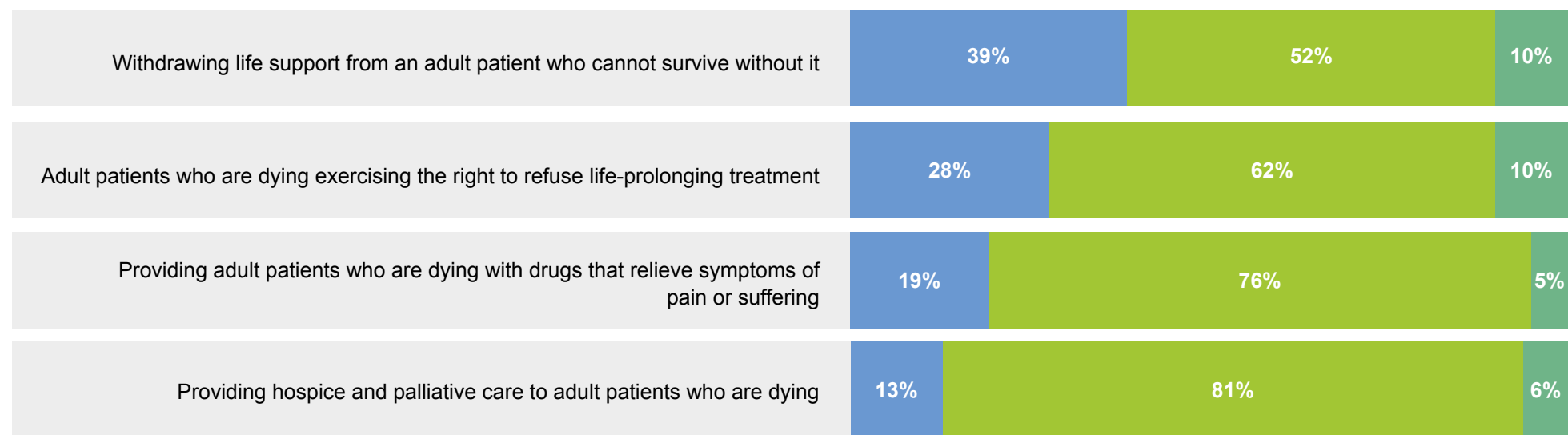
■ This is assisted dying ■ This is not assisted dying ■ Don't know

Four in five people in England appear to understand that palliative care is not the same as assisted dying. The greatest potential for confusion in the debate on assisted dying appears to be on the withdrawal of life support, given that two in five thought that this was assisted dying.

Understanding of assisted dying (2)

A2. Which of these statements do you think means 'assisted dying'?

Unweighted sample base: 2031



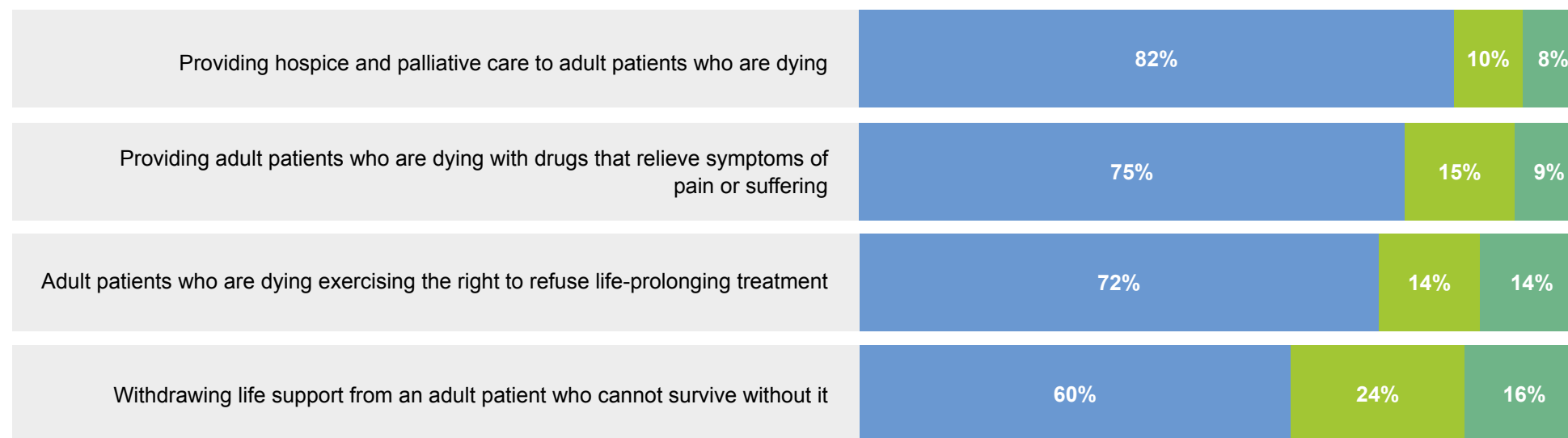
■ This is assisted dying
 ■ This is not assisted dying
 ■ Don't know

Gaps in public understanding on the legality of pain relief and hospice care suggests that any future public debate may need to re-emphasise the current legal position for all aspects of end-of-life care.

Understanding of what options are legal (1)

A3. Which of the following do you think are currently an option for adult patients in England?

Unweighted sample base: 2031



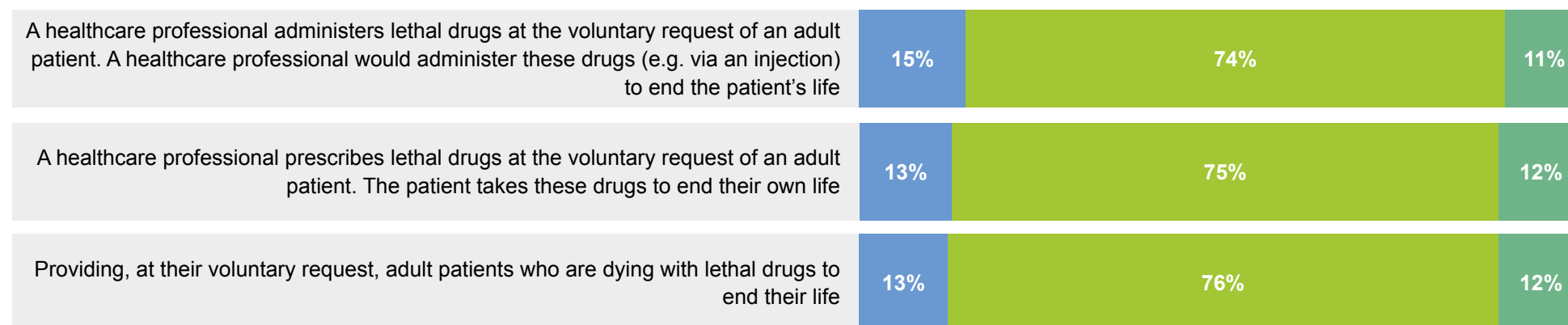
■ Yes – this is a legal option
 ■ No – this is not a legal option
 ■ Don't know

Three quarters of the public understand that the prescription of lethal drugs to end life is illegal. But by extension, a quarter of the population do not feel this is the case or are unsure.

Understanding of what options are legal (2)

A3. Which of the following do you think are currently an option for adult patients in England?

Unweighted sample base: 2031



■ Yes – this is a legal option
 ■ No – this is not a legal option
 ■ Don't know

Views on changing the law

Information on assisted dying was given to respondents before they answered the questions in this section of the survey.

Definition of assisted dying

The survey provided a clear definition of 'assisted dying'. This was described as:

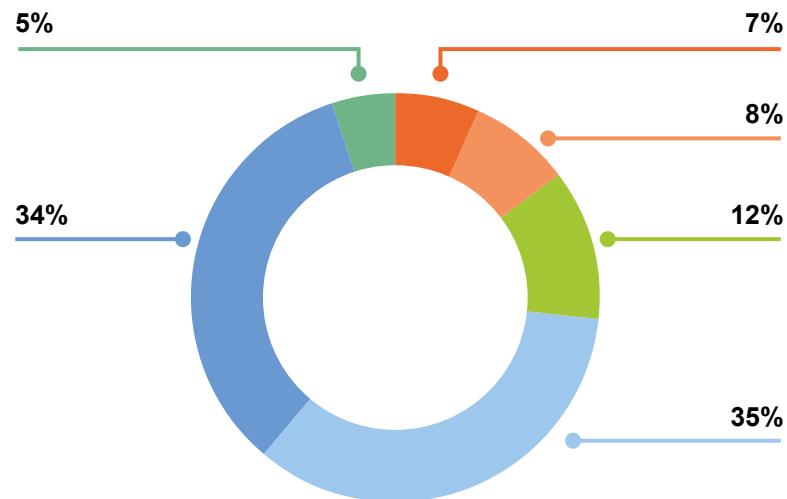
- The involvement of healthcare professionals in providing lethal drugs intended to end a patient's life at their voluntary request, subject to a set of conditions
- Healthcare professionals prescribing lethal drugs to eligible patients to take themselves. This is sometimes referred to as 'physician-assisted dying' or 'physician-assisted suicide'
- Healthcare professionals administering lethal drugs to eligible patients with the intention of ending that patient's life. This is sometimes referred to as '(voluntary) euthanasia'
- The law: Assisted dying is not legal in England

Approaching seven in ten people in England (69%) agree that assisted dying should be legal in England. The proportion who disagree is 15%.

Agreement that assisted dying should be legal in England (1)

A4. To what extent, if at all, do you agree or disagree that assisted dying should be legal in England?

Unweighted sample base: 2031



69% agree that assisted dying should be legal
15% disagree that assisted dying should be legal

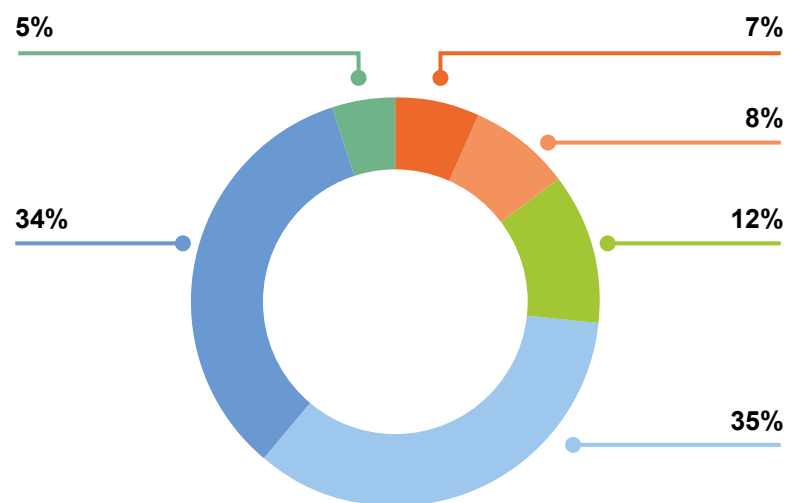
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree Don't know

Those who are older, whose ethnicity is white, and those with no religion are more likely to agree that assisted dying should be legal. Those from ethnic minorities, younger age groups, Muslims, and those working in end-of-life care are less likely to agree.

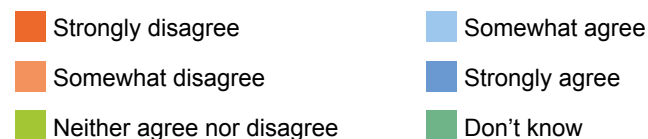
Agreement that assisted dying should be legal in England (2)

A4. To what extent, if at all, do you agree or disagree that assisted dying should be legal in England?

Unweighted sample base: 2031



69% agree that assisted dying should be legal



Significantly more likely to agree:

- 65-74 (77%)
- Aged 55-64 (74%)
- White (74%)
- Those with no religion (80%)

Significantly less likely to agree:

- Black (40%)
- Asian / Asian British (49%)
- Muslim (52%)
- Those working in providing end of life care (60%)
- Aged 25-34 (57%)
- Aged 18-24 (63%)

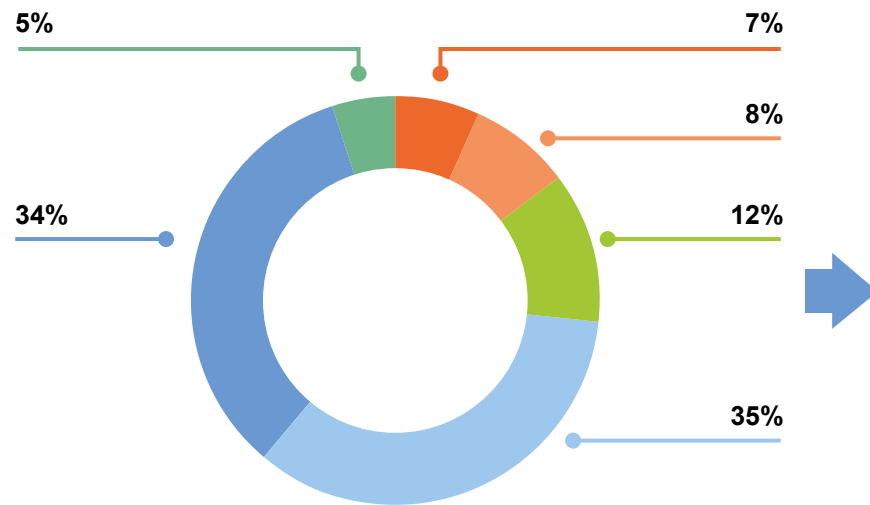
N.B. Those from an ethnic minority and aged 18-24, and 25-34 even less likely to agree (18-24 50%, 25-34 53%)

Believing in a patient’s “right to choose” is the main reason cited for agreement that assisted dying should be made legal in England (57%).

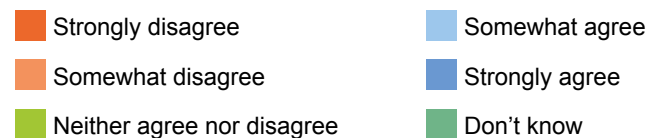
Reasons why they believe that assisted dying should be legal in England – asked of those agreeing assisted dying should be legal in England

A4. To what extent, if at all, do you agree or disagree that assisted dying should be legal in England?

Base 2031



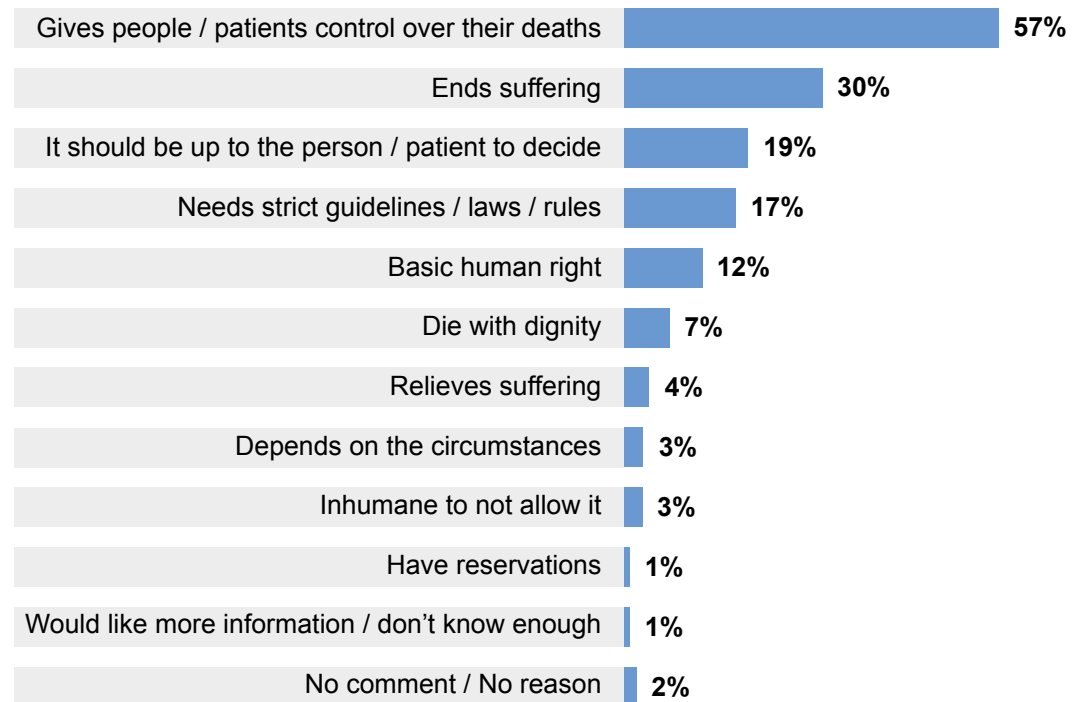
69% agree that assisted dying should be legal



A4.1. Can you explain your reasons for saying this?

Responses given by 1% or more.

Sample base those who agree assisted dying should be legal in England: 1409

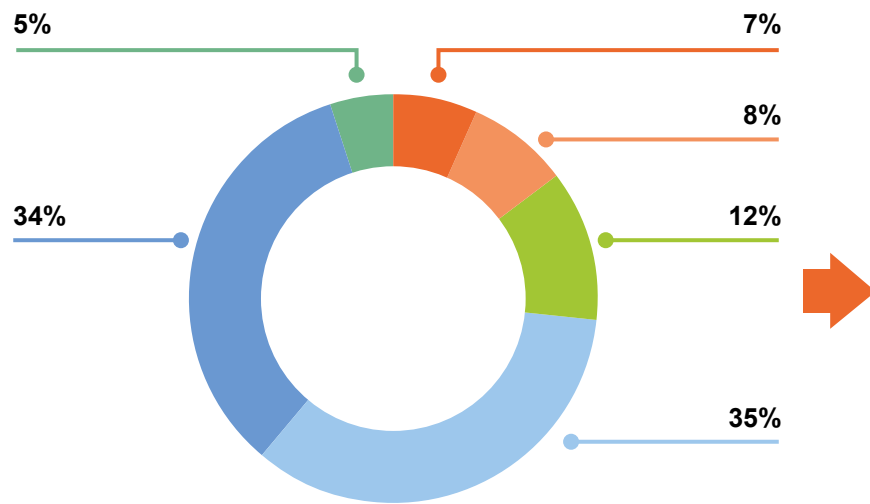


Ethics and religious beliefs are the main factors for those who disagree that assisted dying should be legal. Concerns about the decision-making process are also cited.

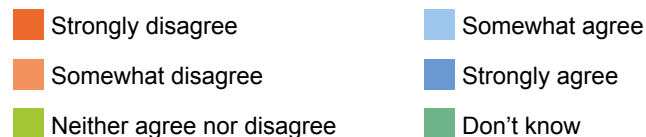
Reasons why they believe that assisted dying should be legal in England – asked of those disagreeing assisted dying should be legal in England

A4. To what extent, if at all, do you agree or disagree that assisted dying should be legal in England?

Base 2031



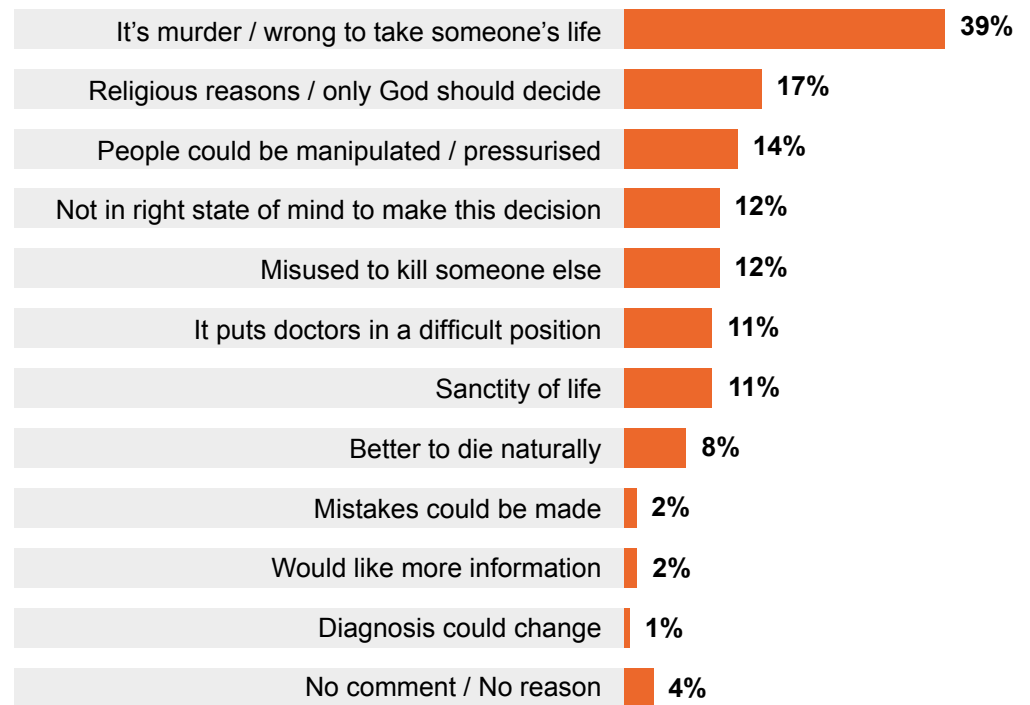
15% disagree that assisted dying should be legal



A4.1. Can you explain your reasons for saying this?

Responses given by 1% or more.

Sample base those who disagree assisted dying should be legal in England: 288



Engagement with media coverage of assisted dying

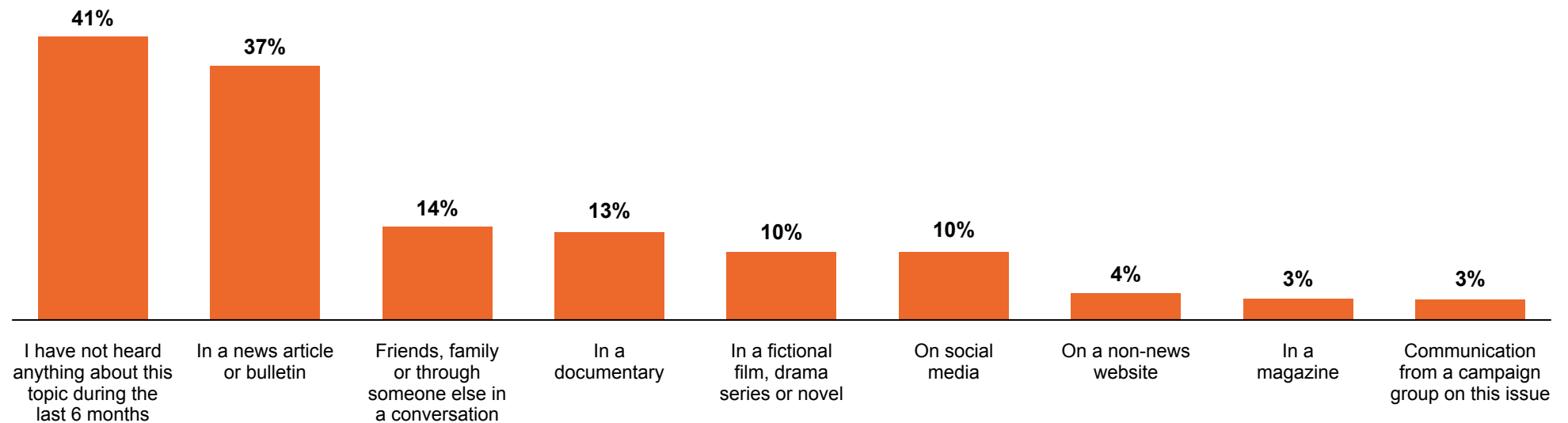
In the last 12 months assisted dying has most commonly been seen in news articles. Overall, 59% had seen, heard or read about the subject of assisted dying during the previous 12 months, suggesting that it is a subject gaining some traction in the media.

Seen/heard anything about assisted dying in the last 6 months (1)

A4a. Please select any sources below from which you have seen, read, or heard about assisted dying in the last 6 months.

N.B. Answers under 3% not shown.

Unweighted sample base: 2031



59% had seen/heard something about assisted dying in the last 6 months

Notable variations in engagement with media coverage of assisted dying.

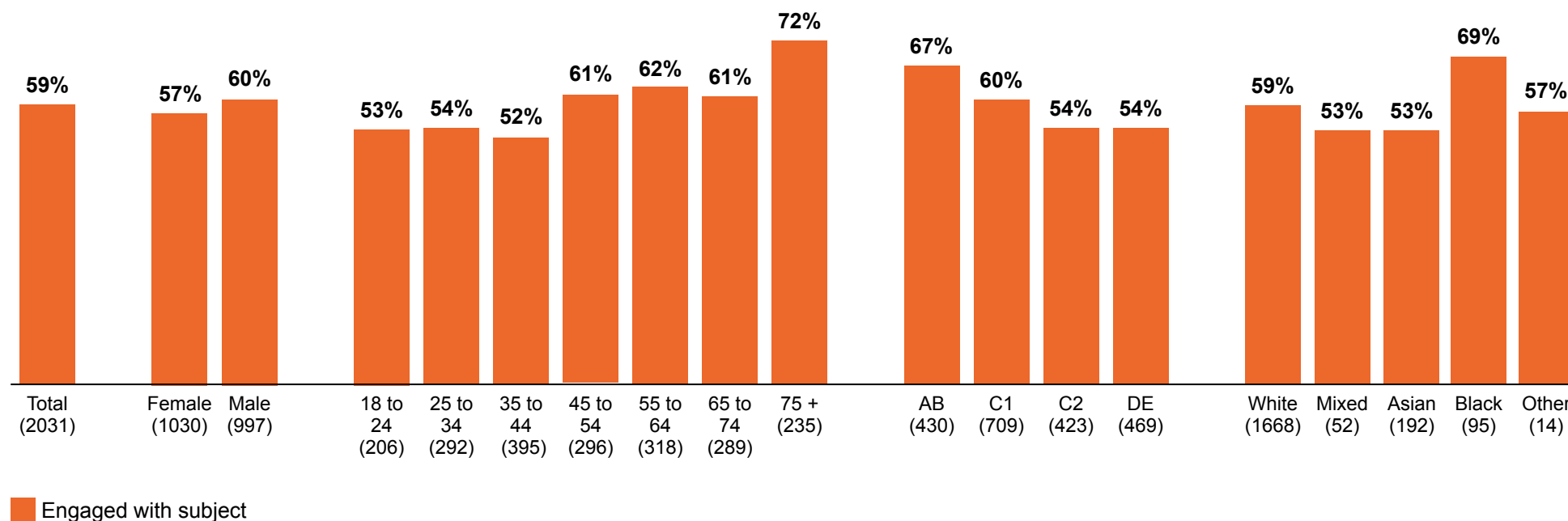
Seen/heard anything about assisted dying in the last 6 months (2)

A4a. Please select any sources below from which you have seen, read, or heard about assisted dying in the last 6 months.

N.B. Answers under 3% not shown.

Unweighted sample bases in parentheses.

Those who recall any form of messaging or engagement with the subject of assisted dying are more likely to support it being made legal in England (72%) than those who have not engaged with this subject (65%). However, there is no way of determining the causation of this variation.



Assisted dying for the terminally ill

The same definition on assisted dying was shown again to respondents ahead of answering the questions in this section along with the following information:

Assisted dying is not legal in England.

If there was a change to England's current law, it would need to state what criteria a patient would have to meet, and we cannot predict the content of any legislation. For the purposes of this survey, it has been assumed that the criteria for 'eligible patients' would fall within the following boundaries to cover patients who:

- Are adults aged 18 years and older
- Have the mental capacity to make the decision to end their own life
- Have made a voluntary request to end their own life
- Have been a resident in England for at least a year

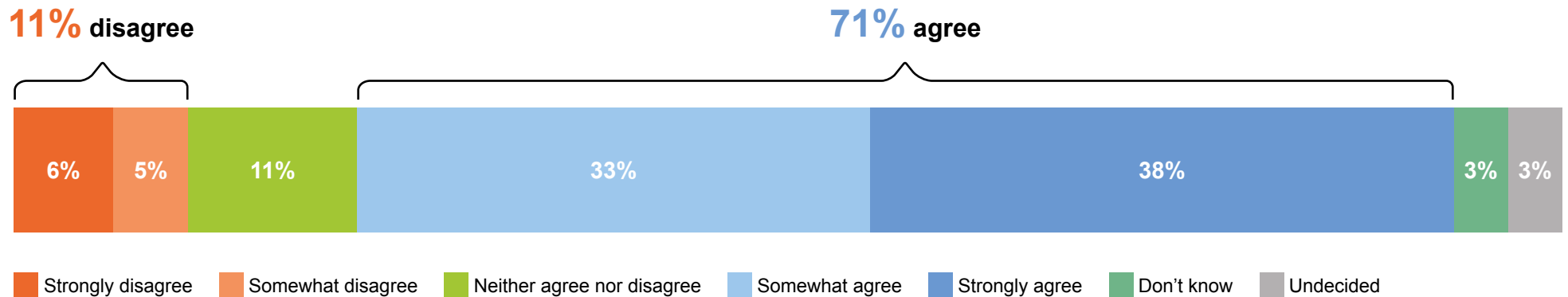
When considering terminal illness, seven in ten (71%) support the option of a patient being prescribed lethal drugs to self-administer.

Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a terminal illness to end their own life

A5. To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to prescribe drugs for eligible patients who have a terminal illness to take themselves to end their own life?

A terminal illness is an inevitably progressive condition, diagnosed by a registered healthcare practitioner, which cannot be reversed by treatment and can be reasonably expected to cause the individuals death.

Unweighted sample base: 2031

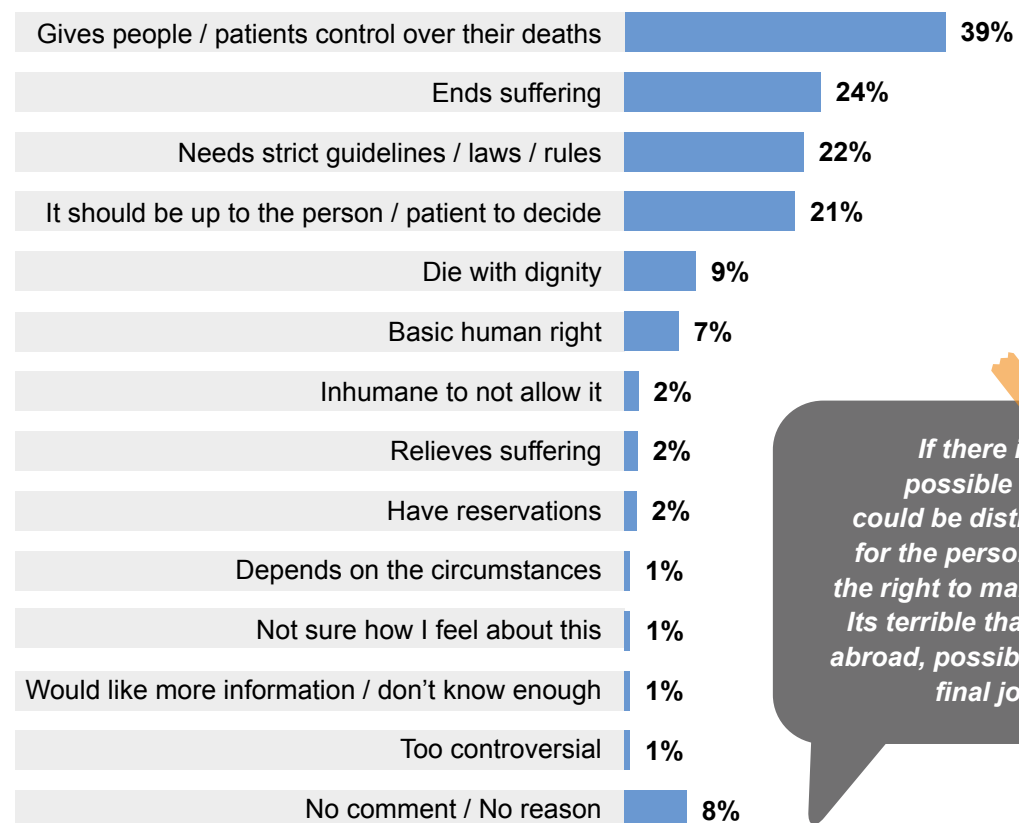


Giving people control, and ending suffering were mentioned the most as reasons why participants agree that the law should change to permit healthcare individuals to prescribe drugs to end life.

Reasons for agreeing that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a terminal illness to end their own life

A5. Can you explain your reasons for saying this?

Sample base: Those who agree with healthcare professional administered option for terminal illness: 1449



There is nothing to be gained from keeping people alive if they have a terminal illness. Assisted dying can save them and their relatives from pain and suffering and for the patient a great deal of indignity. There is nothing to gain from letting a person die slowly and naturally. Having nursed and watch my parents die this way, knowing I could do nothing was the most difficult experience of my life. The family had to watch her for 3 months knowing she would eventually die and we could do nothing but wait.

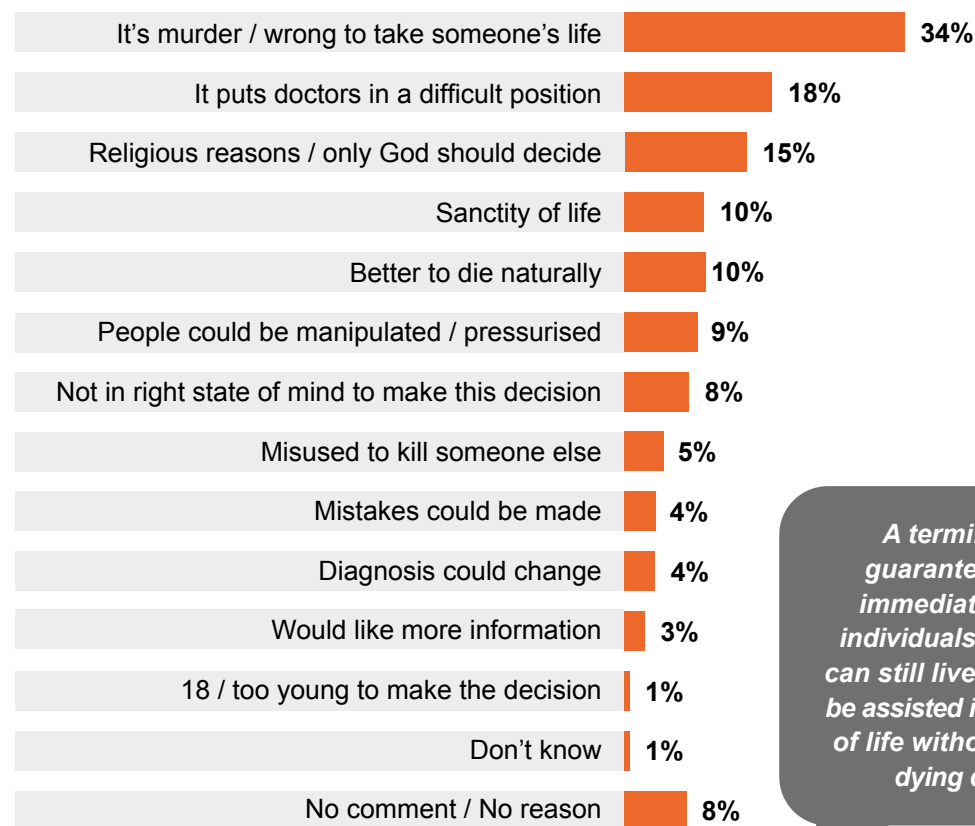
If there is no recovery possible and the ending could be distressing and painful for the person they should have the right to make the final decision. Its terrible that people have to go abroad, possibly alone to make that final journey alone.

Among those who disagree with this option a third mentioned it being murder/wrong, with the impact this might have on doctors also mentioned.

Reasons for disagreeing that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a terminal illness to end their own life

A5. Can you explain your reasons for saying this?

Sample base: Those who disagree with healthcare professional administered option for terminal illness: 219



The decision regarding when a person's life is to end is not ours to make, no matter how much compassion we feel. There is the danger of the "slippery slope" situation – either an idea of a person's life not being valuable enough to continue, the financial costs of their care, pressure from unscrupulous family members who may wish to gain financially from a person's death, to be considered. Also, the mental effect on a health professional doing such a deed, or being coerced into such a deed – how would they live with their conscience.

A terminal illness does not guarantee immediate or near-immediate death and therefore individuals with terminal illnesses can still live good lives. They should be assisted in improving their quality of life without resorting to assisted dying due to a diagnoses.

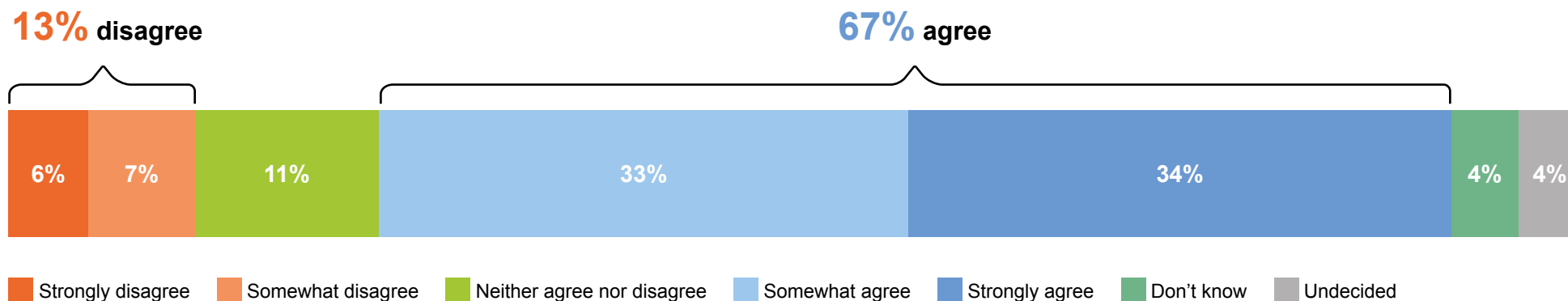
In the same context, i.e. terminal illness, support of lethal drugs being administered by healthcare professionals is marginally lower at 67%.

Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a terminal illness to end their life

A6. To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to administer drugs with the intention of ending an eligible patient's life who has a terminal illness?

A terminal illness is an inevitably progressive condition, diagnosed by a registered healthcare practitioner, which cannot be reversed by treatment and can be reasonably expected to cause the individual's death.

Unweighted sample base: 2031

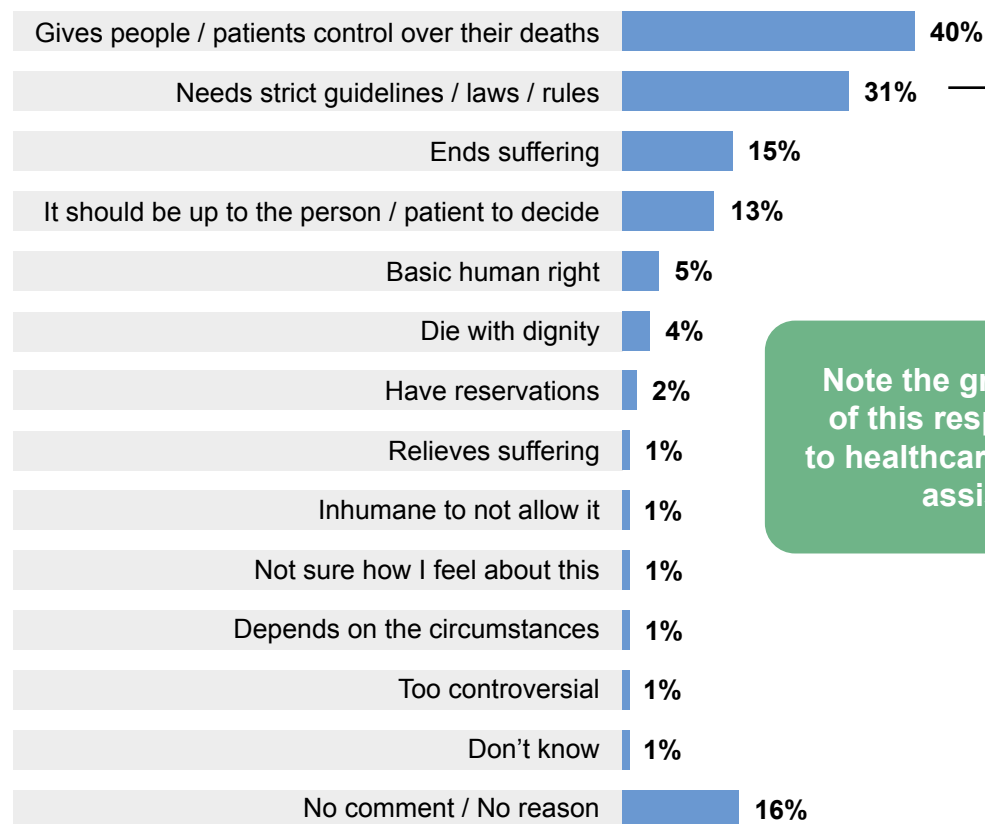


Needing strict guidelines is mentioned more for the prospect of healthcare professionals administering instead of prescribing assisted dying drugs.

Reasons for agreeing that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a terminal illness to end their life

A6. Can you explain your reasons for saying this?

Sample base: Those who agree with healthcare professional administered option for terminal illness: 1365



Note the greater prevalence of this response in relation to healthcare professional-led assisted dying

Sometime a person's life is so unbearable that it is the kindest option. I was a carer for my mother who had motor neurone disease and she was desperate to die in the final stages. It felt cruel that her wish could not be granted.

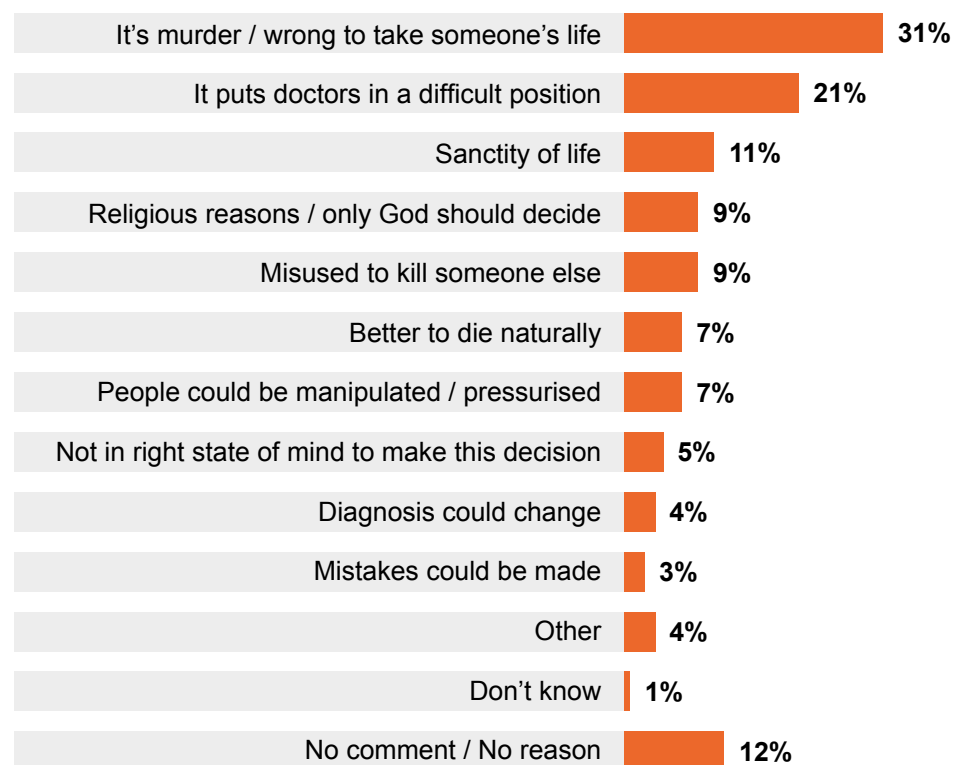
Only if there is a registered and legal process that has been followed.

The same themes as seen for prescribing are mentioned for those disagreeing that the law should change to permit healthcare individuals to administer drugs.

Reasons for disagreeing that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a terminal illness to end their life

A6. Can you explain your reasons for saying this?

Sample base: Those who disagree with healthcare professional administered option for terminal illness: 258



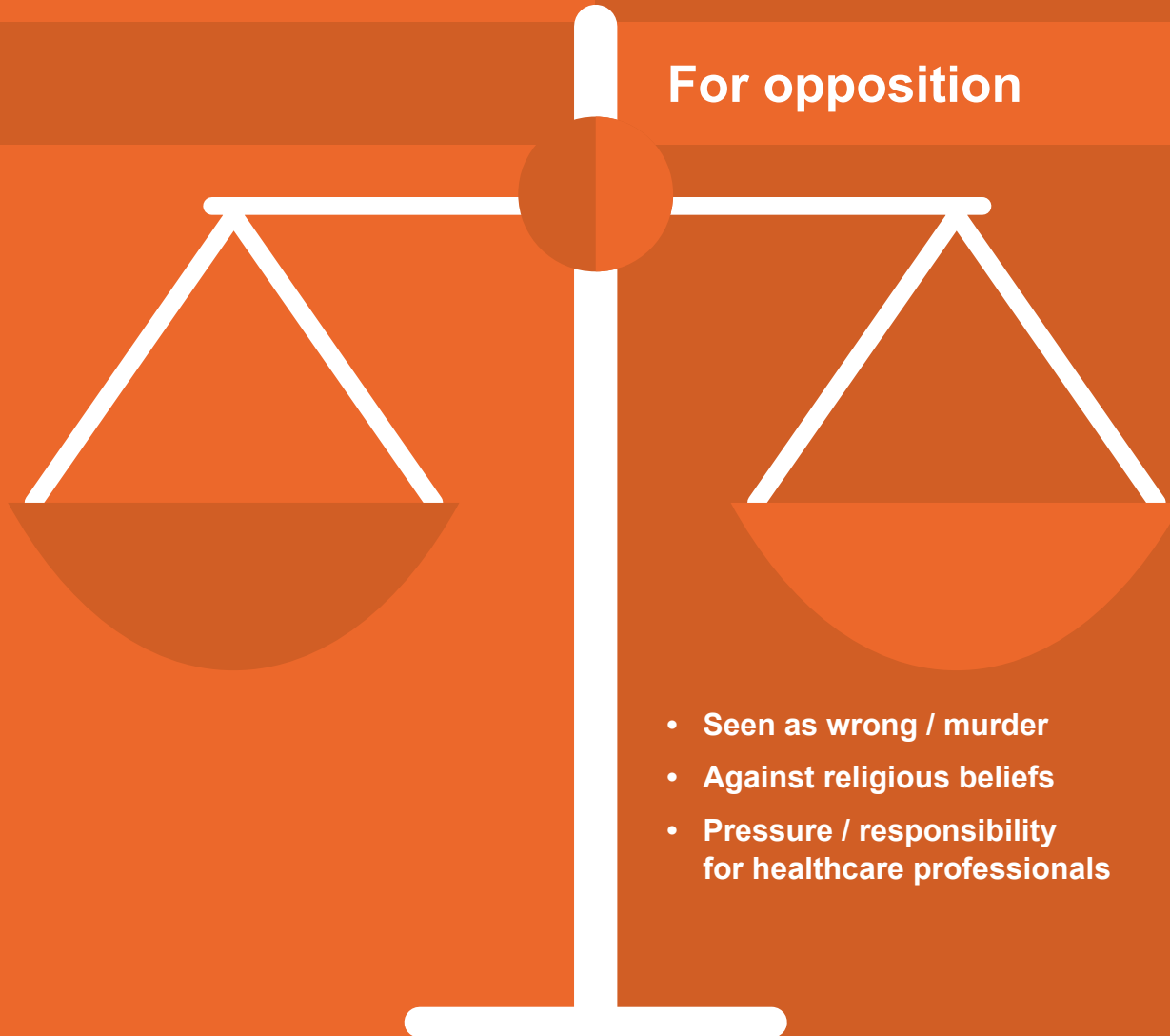
I think it would be extremely hard for healthcare professionals to have to deal with a situation like this.

It's wrong morally and legally it should not be allowed to happen.

Recurring dominant themes

For support

For opposition



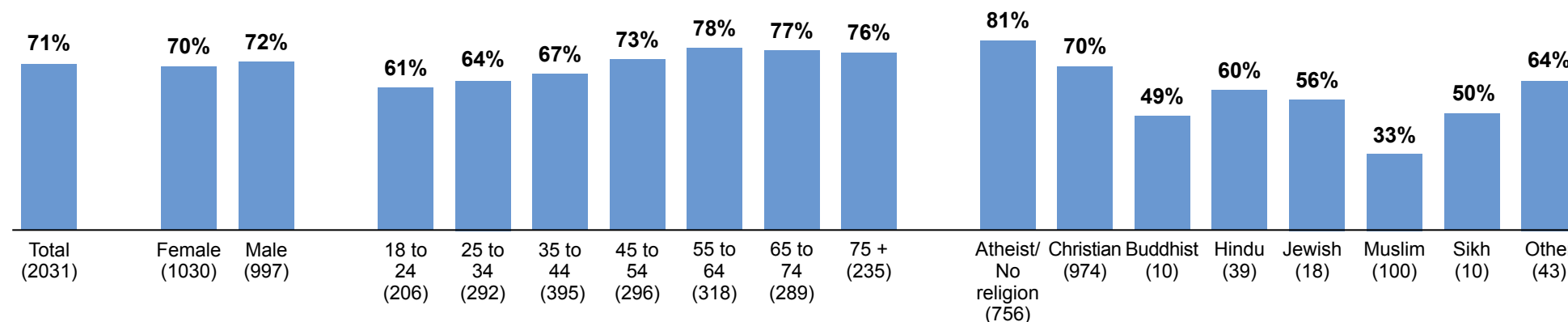
- Control
- Choice
- Ends suffering

- Seen as wrong / murder
- Against religious beliefs
- Pressure / responsibility for healthcare professionals

In the context of terminal illness, support for a change in the law to allow assisted dying rises with age and is highest among those with no religious beliefs. Support is lowest among Muslim respondents.

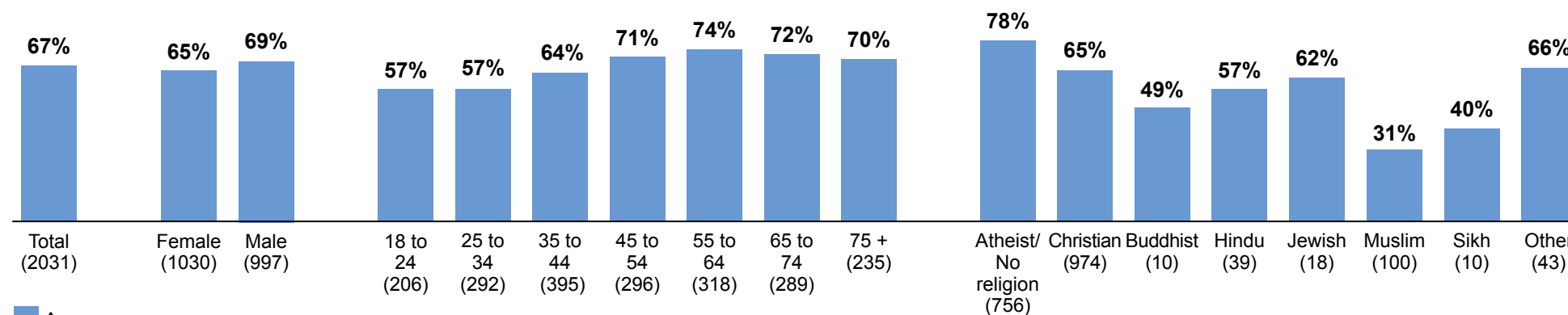
Agreement with self-administered assisted dying for terminal illness

A5/A6 sample bases in parentheses.



Agreement with healthcare professional-administered assisted dying for terminal illness

A5/A6 sample bases in parentheses.



Agree

Assisted dying for those who do not have a terminal illness

The same definition on assisted dying was shown again to respondents ahead of answering the questions in this section along with the following information:

Assisted dying is not legal in England.

If there was a change to England's current law, it would need to state what criteria a patient would have to meet, and we cannot predict the content of any legislation. For the purposes of this survey, it has been assumed that the criteria for 'eligible patients' would fall within the following boundaries to cover patients who:

- Are adults aged 18 years and older
- Have the mental capacity to make the decision to end their own life
- Have made a voluntary request to end their own life
- Have been a resident in England for at least a year

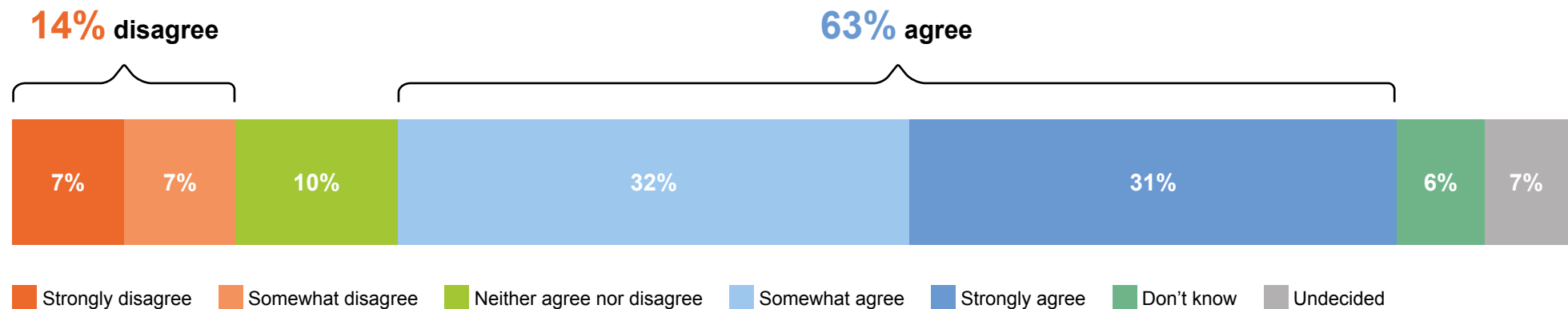
When considering a serious physical non-terminal illness causing intolerable suffering, support for the option of a patient being prescribed lethal drugs to self-administer is 8-percentage points lower than for terminal illness at 63%.

Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a serious physical illness to end their own life

A7.1 To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to prescribe drugs for eligible patients to take themselves to end their own life who are not terminally ill but are...?

An adult patient who has a serious physical illness causing intolerable suffering that cannot be relieved.

Unweighted sample base: 2031



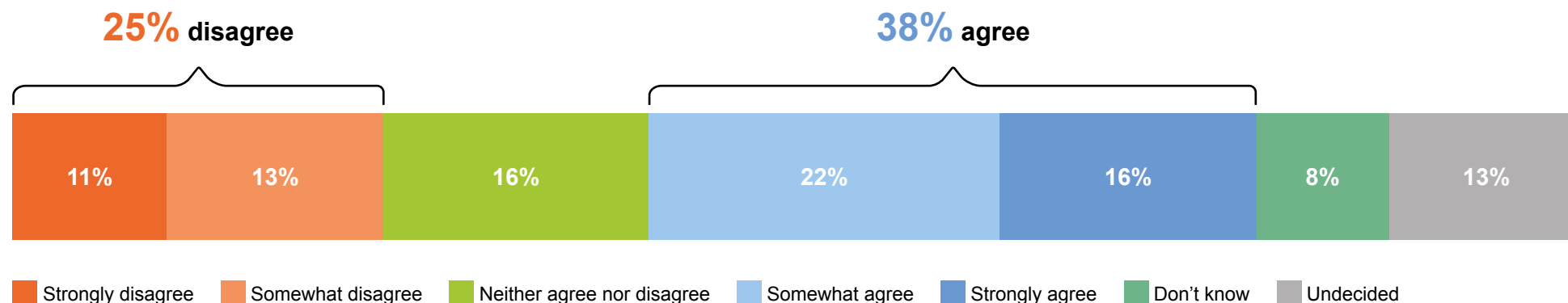
When considering a mental illness, the prospect of a healthcare professional prescribing lethal drugs is only supported by a minority (38%), with uncertainty and opposition more pronounced than in the previous scenarios.

Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a serious mental illness to end their own life

A7.1 To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to prescribe drugs for eligible patients to take themselves to end their own life who are not terminally ill but are...?

An adult patient who has a serious mental health illness causing intolerable suffering that cannot be relieved.

Unweighted sample base: 2031



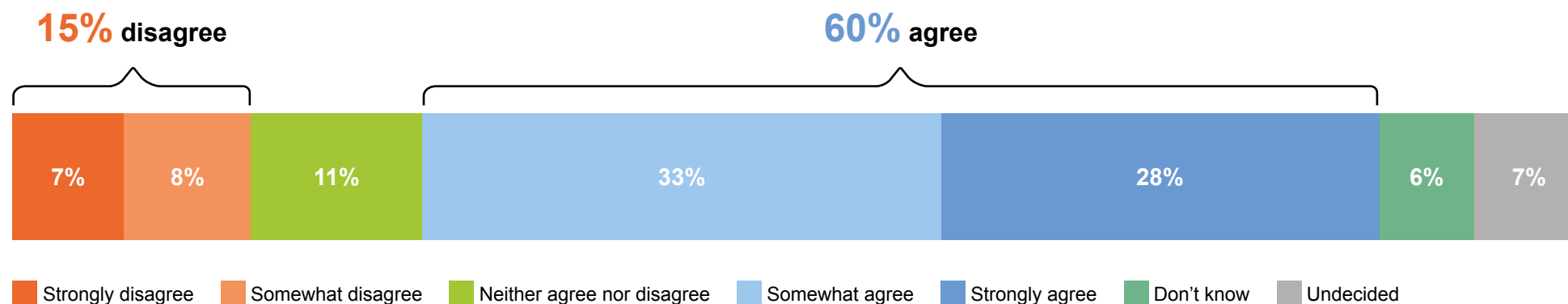
Three in five believe the law in England should allow healthcare individuals to administer drugs to patients with a serious physical illness.

Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a serious physical illness to end their life

A8.1 To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to prescribe drugs for eligible patients to take themselves to end their own life who are not terminally ill but are...?

An adult patient who has a serious physical illness causing intolerable suffering that cannot be relieved.

Unweighted sample base: 2031



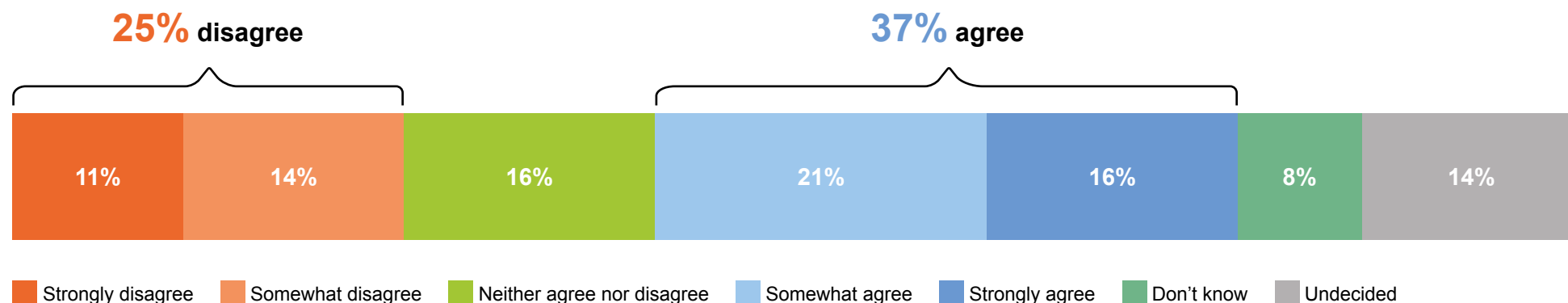
Again, agreement that a healthcare professional should be legally able to administer drugs to end life to eligible patients with serious mental illness, is found among a minority.

Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a serious mental illness to end their life

A8.2 To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to administer drugs with the intention of ending an eligible patient's life for those who are not terminally ill but are...?

An adult patient who has a serious mental health illness causing intolerable suffering that cannot be relieved.

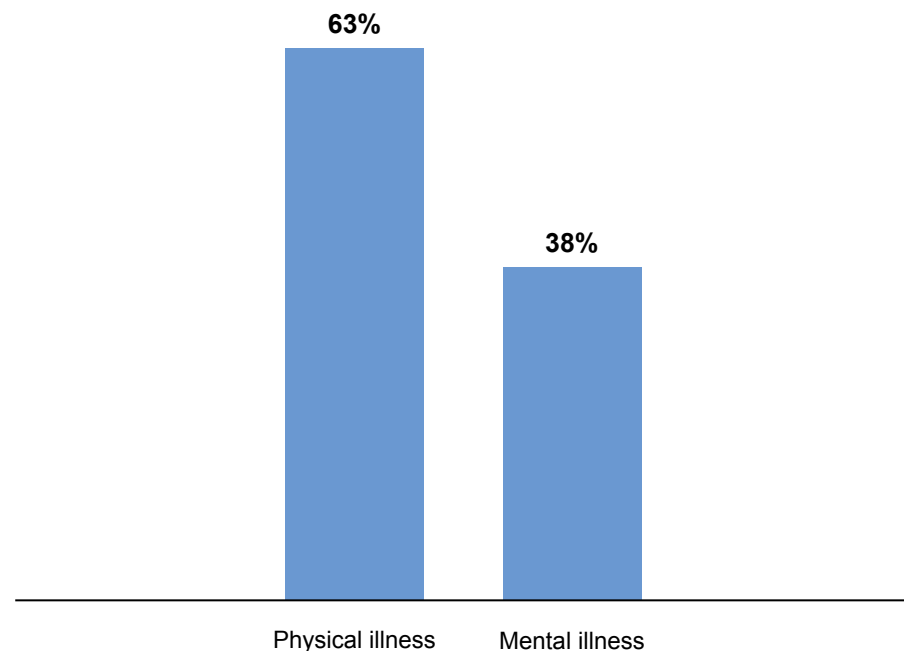
Unweighted sample base: 2031



In summary, there is notably lower agreement that the law should change to permit healthcare individuals to prescribe or administer drugs to end the lives of patients who have a serious mental illness.

A7. To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to prescribe drugs for eligible patients to take themselves to end their own life who are not terminally ill but are...?

Unweighted sample base: 2031

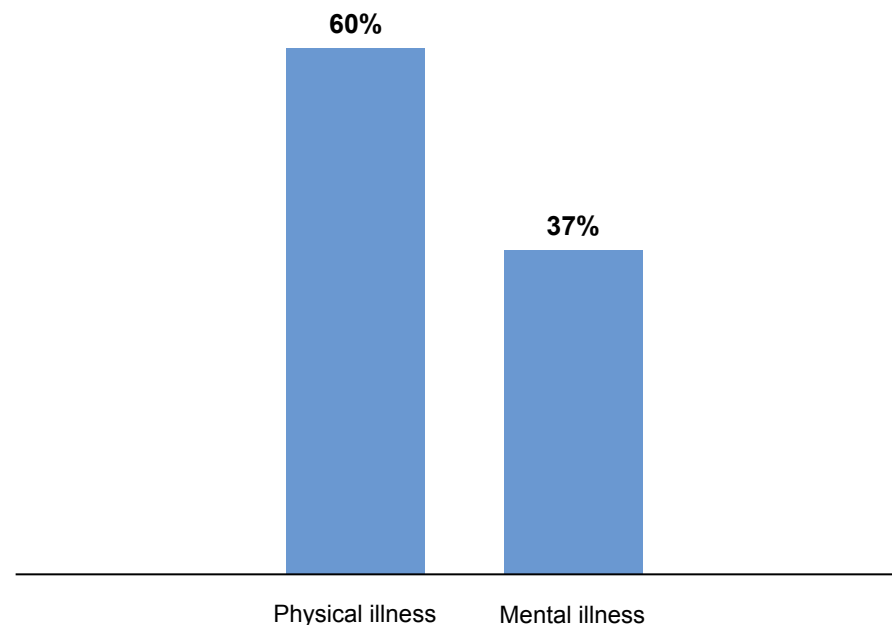


Prescribe

■ Agree

A8. To what extent, if at all, do you agree or disagree that the law should be changed to permit healthcare professionals to administer drugs with the intention of ending an eligible patient's life for those who are not terminally ill but are...?

Unweighted sample base: 2031



Administer

■ Agree

Attitudinal statements regarding the assisted dying debate

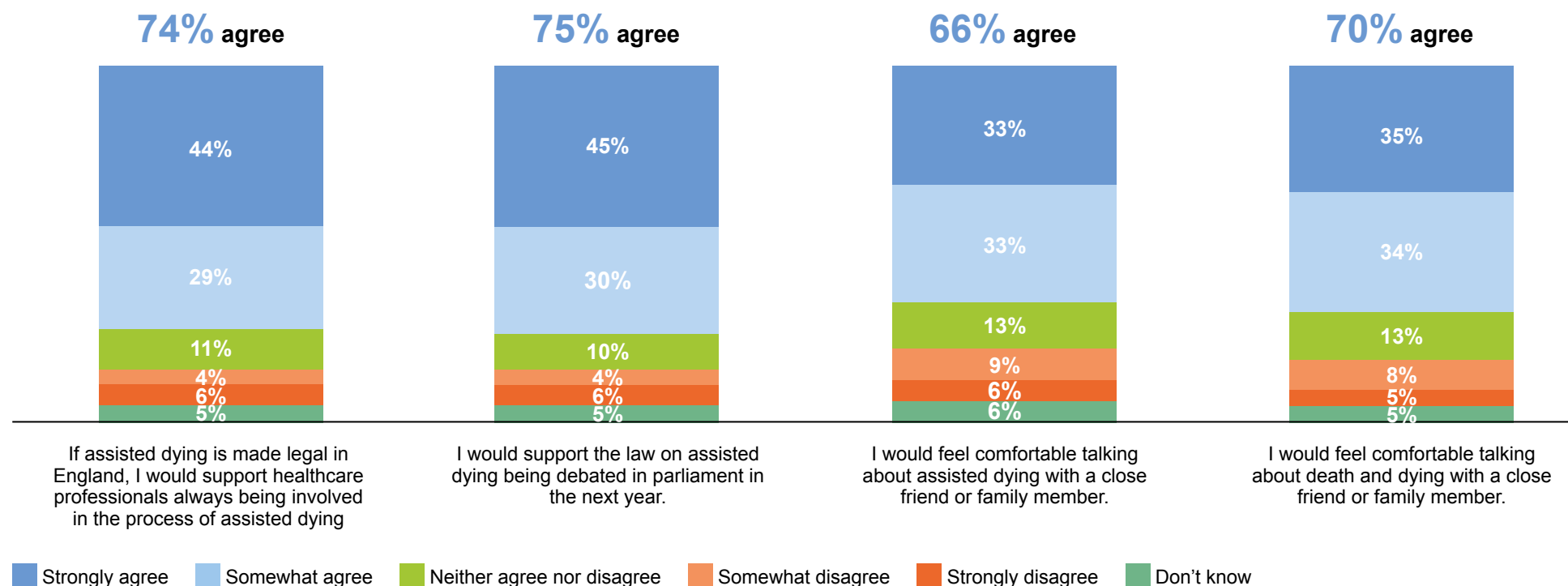
Most participants support health care professionals always being involved in the process (74%), with 75% also supporting the law being debated in the next year. 66% would feel comfortable talking about assisted dying, and 70% feel comfortable talking about dying and death with family/friends.

Agreement with attitudinal statements

A9 So that we understand a little more what people in England feel about assisted dying, to what extent, if at all, do you agree or disagree with each of these statements?

N.B. Answers under 3% not shown.

Unweighted sample base: 2031

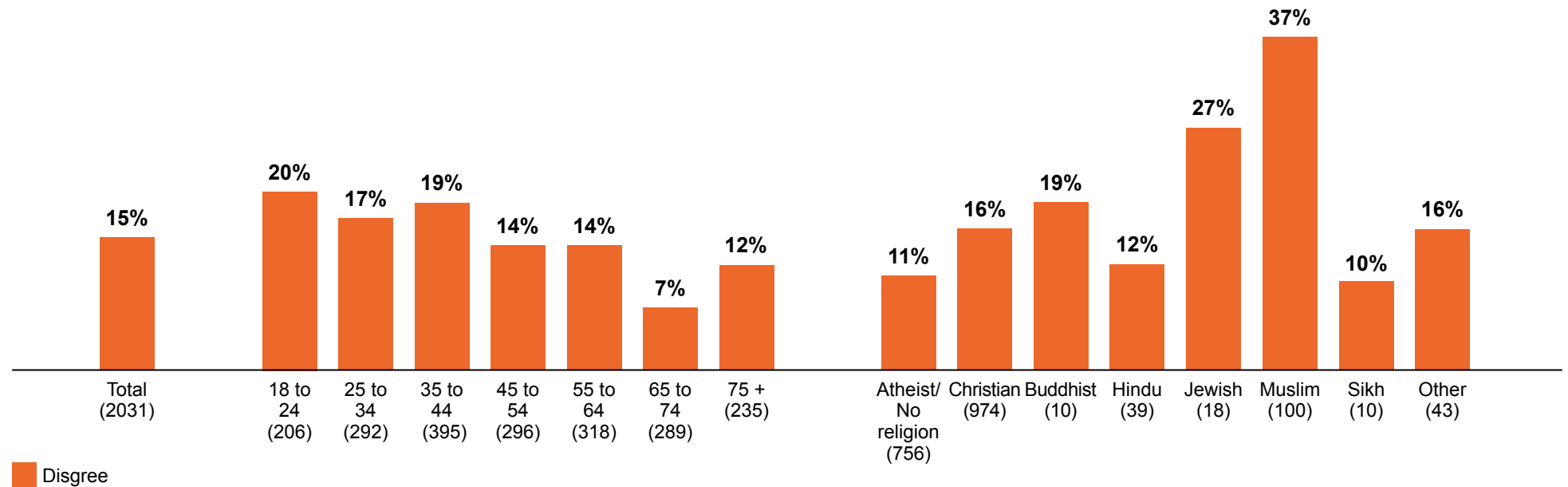


Conversations about assisted dying may be particularly difficult for those with Islamic faith.

Agreement with attitudinal statement – comfortable talking about assisted dying with a close friend or family member

I would feel comfortable talking about assisted dying with a close friend or family member

Unweighted sample bases in parentheses.



Survey details

Data collection and cleaning

Fieldwork was conducted between 14 and 29 February 2024, with a total of 2,031 responses. The survey was undertaken using an online panel. The design of the online survey was device agnostic, ensuring that it was accessible via both mobile and desktop devices. During the fieldwork, respondents' data was thoroughly checked for quality control. Responses that did not meet the following criteria were removed:

- Took under 3 minutes to complete the survey
- Didn't give full postcode
- Their full postcode didn't match the region they selected
- The respondent inputted random characters/numbers into openended questions. The quality of the responses to text-based(open) questions, in our experience, is a key indicator of responsequality (i.e. engagement with the survey subject matter)

Support

Given the sensitive nature of the subject matter, signposting to three support organisations was included at the start and end of the survey.

This information contained both telephone numbers and website links.



Survey sample

During the data collection, the composition of the survey sample was controlled using quotas. These quotas were set based on the following characteristics, with targets set using 2021 Census data for England:

- Age (5x age bands)
- Gender
- Ethnicity
- Socio-economic group (SEG)
- Geographic region

After the completion of fieldwork, the profile of the cleaned data set was reviewed by these variables. To correct some minor under and over representation, weights were applied by gender, age, ethnicity region. This weighting process ensures that the resulting data set is fully representative of the population of England. Disability was also monitored for the sample.

The profile of the survey sample after the application of corrective weighting is summarised below:

Gender and age	Female	Male	18-24	25-34	35-44	45-54	55-64	65-74	75+
	51%	49%	11%	14%	20%	16%	17%	12%	11%
Region	North East	North West	Yorkshire & Humber	East Midlands	West Midlands	East of England	London	South East	South West
	5%	13%	10%	9%	11%	11%	16%	16%	10%
Ethnicity	White	Mixed ethnicity	Asian	Black	Other				
	81%	3%	10%	4%	2%				
Religion	Atheist/ no religion	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	Other	Prefer not to say/ don't know
	37%	47%	0.5%	2%	1%	6%	1%	2%	4%
Disability	Yes	No							
	17%	82%							

Appendix 1: Differences by demographics

Key differences by gender

By gender, there are no difference in agreement or disagreement that assisted dying should be legal in England, however:

- Males (41%) are more likely to agree than females (34%) that the law should change to allow healthcare professionals to prescribe drugs for eligible patients who are not terminally ill but have a serious mental health condition to end their lives.
- Males (42%) are more likely to agree than females (33%) that the law should change to allow healthcare professionals to administer drugs for eligible patients who are not terminally ill but have a serious mental health condition to end their lives.
- Males (77%) are more likely to support the law on assisted dying being debated in parliament in the next year (females 73%).

Key differences by ethnicity

By ethnicity, those whose ethnicity is white (74%) are more likely to agree that assisted dying should be legal in England, those who are Asian (49%), or Black (40%) are less likely to agree.

This pattern continues throughout the questions, with agreement higher amongst those whose ethnicity is white, and lower amongst those who are Asian or Black.

- Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a terminal illness to end their own life (White 75%, Asian 51%, Black 52%)
- Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a terminal illness to end their life (White 71%, Asian 48%, Black 43%)
- Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a serious physical illness to end their own life (White 66%, Asian 51%, Black 43%)
- Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a serious physical illness to end their life (White 63%, Asian 51%, Black 45%)
- Agreement that healthcare professionals should always be involved in the process of assisted dying (White 79%, Asian 52%, Black 44%)
- Support for the law on assisted dying being debated in parliament in the next year (White 80%, Asian 52%, Black 53%)
- Comfortable talking about assisted dying (White 70%, Asian 52%, Black 51%)
- Comfortable talking about death and dying (White 73%, Asian 52%, Black 52%)

Key differences by religion

By religion, those with no religion/atheist (80%) are more likely to agree that assisted dying should be legal in England, those who are Muslim (26%) are less likely to agree, with other religions tending to be lower, but not significantly so due to base sizes.

This pattern continues throughout the questions, with agreement higher amongst those with no religion/atheist, and lower amongst those who are Muslim, with Christians significantly lower for a few of the following questions:

- Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a terminal illness to end their own life (No religion/atheist 81%, Muslim 33%)
- Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a terminal illness to end their life (No religion/atheist 78%, Christian 65% Muslim 31%, total sample 67%)
- Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a serious physical illness to end their own life (No religion/atheist 72%, Christian 59% Muslim 39%, total sample 63%)
- Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a serious physical illness to end their life (No religion/atheist 69%, Christian 57% Muslim 35%, total sample 60%)
- Agreement that healthcare professionals should always be involved in the process of assisted dying (No religion/atheist 83%, Muslim 33%)
- Support for the law on assisted dying being debated in parliament in the next year (No religion/atheist 84%, Muslim 32%)
- Comfortable talking about assisted dying (No religion/atheist 71%, Muslim 43%)
- Comfortable talking about death and dying (No religion/atheist 74%, Muslim 43%)

Key differences by age (1)

By age, those aged 18-24 (63%), and 25-34 (57%) are less likely to agree that assisted dying should be legal in England (total 69%). This is even lower amongst those from an ethnic minority in those age groups, and those aged 35-44 (Those from an ethnic minority and 18-24 (50%), 25-34 (42%), 35-44 (41%)).

Those aged 55-64 (74%) and 65-74 (77%) are more likely to agree that assisted dying should be legal in England. Those who are aged 45-54 and whose ethnicity is white are also more likely to agree (79%).

- Those aged 18-24 and 25-34 consistently score lower across questions relating to terminally ill patients, with those aged 55-64 and 65-74 consistently scoring higher.
- Those aged 18-24, 25-34 and 35-44, AND from an ethnic minority score even lower consistently across questions related to terminally ill patients.

Key differences by age (2)

For the questions related to those not terminally ill, there are a few differences to those ages more or less likely to agree:

- Those aged 25-34 (57%) are less likely to agree that those suffering from a serious physical illness to be prescribed drugs by a healthcare professional to end their own life (total 63%).
- Those aged 45-54 (69%), and 65-74 (68%) are more likely to agree that those suffering from a serious physical illness to be prescribed drugs by a healthcare professional to end their own life.
- Those aged 45-54 (45%) are more likely to agree that those suffering from a serious mental illness to be prescribed drugs by a healthcare professional to end their own life (total 38%). Those aged 65-74 are less likely to agree (30%), with those aged 25-34, and 35-44 more likely to disagree that this should be allowed (total disagree 25%, 25-34 29%, 35-44 30%).
- Those aged 25-34 (54%) are less likely to agree that the law should change to permit healthcare professionals to administer drugs to end their life for those suffering from a serious physical illness (total 60%). Those from an ethnic minority for this age group even less likely to agree (47%). Those aged 45-54 were more likely to agree this should be allowed.
- Those aged 45-54 (45%) are more likely to agree that the law should change to permit healthcare professionals to administer drugs to end their life for those suffering from a serious mental illness (total 37%). Those aged 65-74 are less likely to agree (30%), with those aged 35-44 more likely to disagree that this should be allowed (total disagree 25%, 35-44 29%).

Key differences by age (3)

- Those in the older age groups are more likely to agree that a healthcare professional should always be involved in the process of assisted dying, with the younger age groups less likely to agree (18-24 60%, 25-34 62%, 35-44 67%, 55-64 81%, 65-74 85%, 75+ 85%). N.B. those from an ethnic minority in the younger age groups are even less likely to agree; those in the 45-54 age group are no different from the total score.
- Those from the younger age groups are less likely to support the law on assisted dying being debated in parliament in the next year (18-24 60%, 25-34 64%, 35-44 69%, 45-54 81%, 55-64 82%, 65-74 84%, 75+ 83%). N.B. those from an ethnic minority and aged 18-44 are also less likely to agree.
- Those in the younger age groups feel less comfortable talking about assisted dying (18-24 58%, 25-34 61%, 35-44 62%), with those in the two oldest age groups more comfortable (65-74 77%, 75+ 76%). N.B. those from an ethnic minority and aged 18-44 even less likely to feel comfortable.
- Those in the younger age groups feel less comfortable talking about death and dying (18-24 61%, 25-34 64%, 35-44 64%), with those in the two oldest age groups more comfortable (65-74 83%, 75+ 74%). N.B. those from an ethnic minority and aged 18-44 even less likely to feel comfortable.

Key differences by health condition

Those with any health condition expected to last at least 12 months are more likely to agree that assisted dying should be legal in England (75%), those without a health condition are less likely to agree (68%).

This pattern continues throughout the questions, with agreement higher amongst those with a disability, and lower amongst those without, with no difference seen for questions where the patient doesn't have a terminal illness:

- Agreement that the law should change to permit healthcare individuals to prescribe drugs for eligible patients who have a terminal illness to end their own life (with a disability 77%, without a disability 70%)
- Agreement that the law should change to permit healthcare individuals to administer drugs for eligible patients who have a terminal illness to end their life (with a disability 72%, without a disability 66%)
- Agreement that healthcare professionals should always be involved in the process of assisted dying (with a disability 79%, without a disability 73%)

This project has been delivered to ISO 9001:2015, 20252:2019 and 27001:2013 standards.





Nuffield Council on Bioethics

100 St John Street
London EC1M 4EH

T 0207 631 0566

E bioethics@nuffieldbioethics.org

www.nuffieldbioethics.org

Registered charity No. 206601



Hopkins Van Mil

Coppergate House, 10 White's Row,
London E1 7NF

T 0207 953 7914

E info@hopkinsvanmil.co.uk

www.hopkinsvanmil.co.uk



M·E·L Research Ltd

Somerset House, 37 Temple Street
Birmingham B2 5DP

T 0121 604 4664

E info@melresearch.co.uk

www.melresearch.co.uk