

Quebec “Medical Aid in Dying” Survey

Life Canada in cooperation with
The Canadian Institute for Education
on the Family

Overview

- Methodology 3
- Initial Reactions 5
- Priority for the health care system 11
- Concerns 14
- Final Views 24
- Appendix: Questions asked 30

METHODOLOGY

Methodology

- Survey has 500 responses from the province of Quebec, giving a margin of error of +/- 4.4% nineteen times out of twenty
- Survey was conducted between October 24 and October 26, 2013
- Survey was conducted online using a representative panel.
- Results have been weighted by age, gender, region and past provincial vote to ensure accuracy.
- Respondents were tracked by their mother tongue, and while sample sizes are too small to provide meaningful breakouts for allophones and anglophones, they each made up less than 10% of the sample.

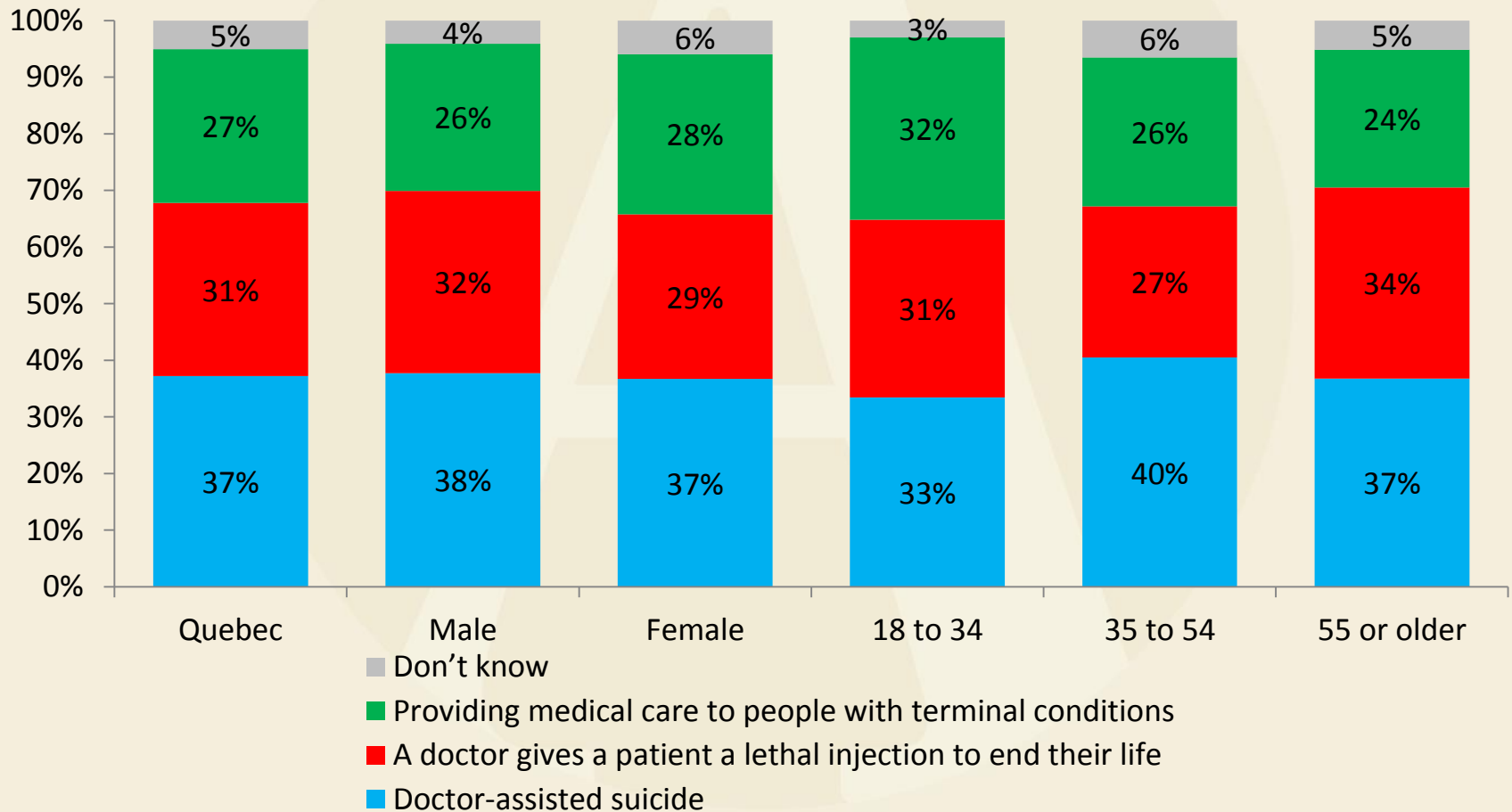
A large, stylized, light blue letter 'A' is centered on a dark blue circular background. The 'A' has a unique, slightly irregular shape with a pointed top and a wide base.

INITIAL REACTIONS

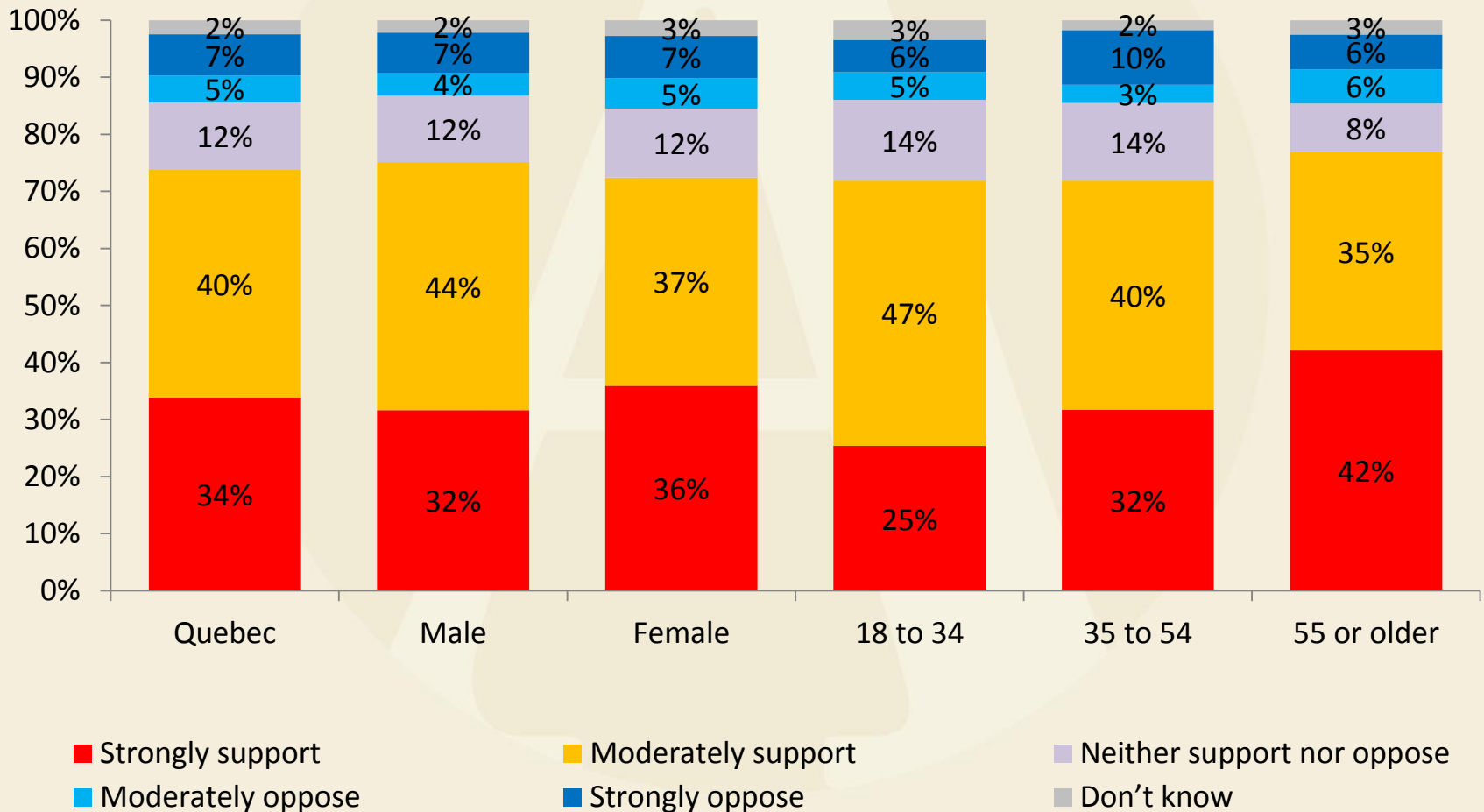
Initial Reactions

- Respondents were asked a series of questions about their first reactions to the concept of “medical aid in dying”.
- They were first asked what they thought the phrase “medical aid in dying” meant, then asked based on what they knew if they supported or opposed it.
- Following that, the concept from Bill 52 was explained in a balanced manner and respondents were again asked if they supported or opposed it.
- For each question the results are displayed for gender, age, region, what language they took the survey in, who they voted for in the 2012 election, religion, its importance in their lives and education levels
- The full text of all questions appears in the Appendix

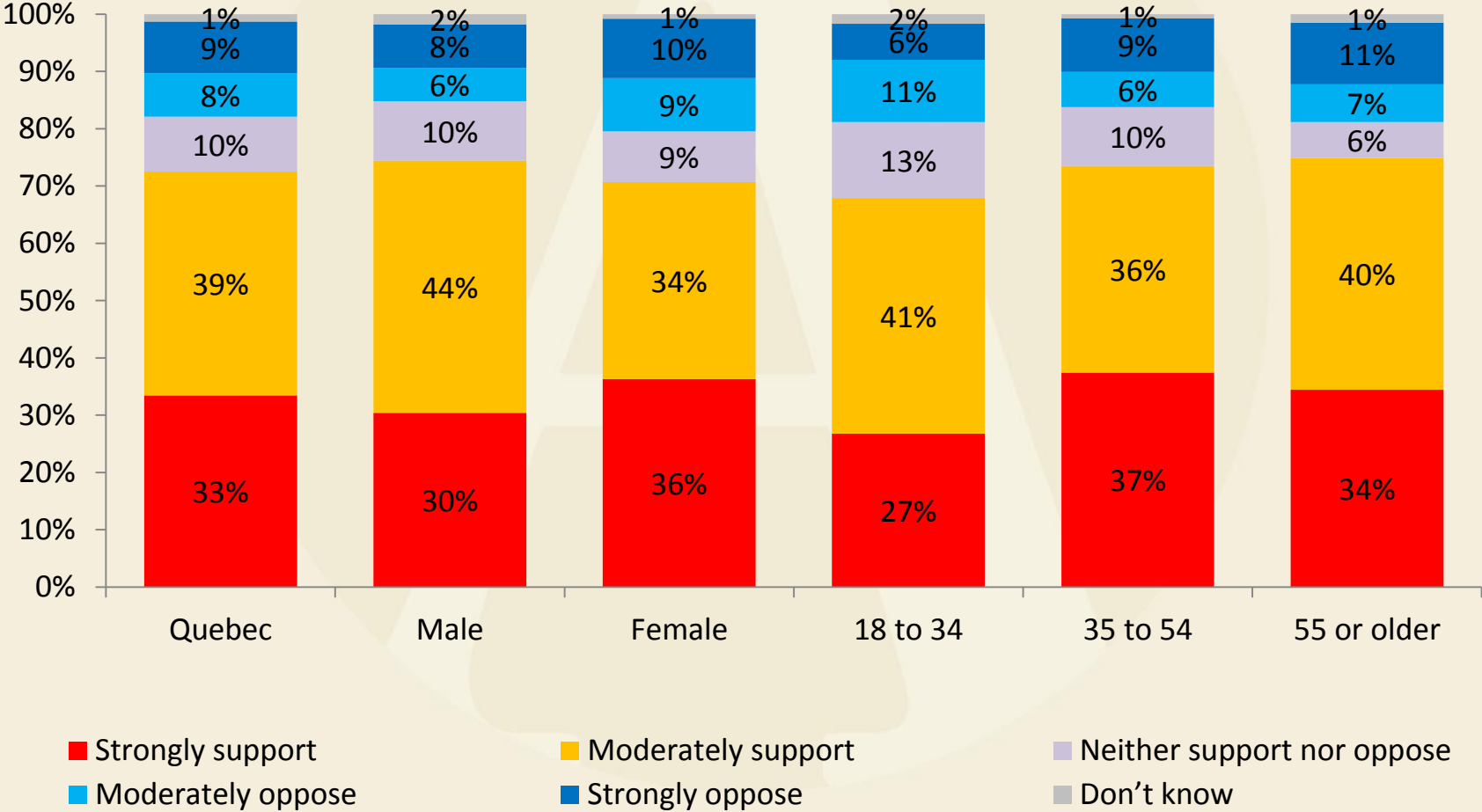
In your opinion what does the phrase “medical aid in dying” mean?



Based on what you know about “medical aid in dying,” do you support or oppose it?



Support or opposition after “Medical aid in Dying” and Bill 52 are explained



Initial Reactions

- Less than a third (31%) correctly know what the phrase “medical aid in dying means.” More than a third (37%) confuse it with doctor-assisted suicide.
 - More worrying nearly a third (27%) think it is some sort of palliative care. This is a term that gains the concept more support.
 - People in eastern Quebec, and CAQ voters are most likely to get it right. While the most religious people are most likely to think it meant palliative care.
- When asked without any definition of the concept if they supported “medical aid in dying” nearly three quarters (74%) supported it and only 12% opposed it.
 - The intensity of support is highest among women, people over 55, PQ and CAQ voters. Intensity of support is highest amongst those who say that religion plays no part in their lives.
- Opposition is under 50% for all groups, but is highest (32%) among people who say religion plays a very important part in their lives.
- When asked if they support it after a balanced description of Bill 52, there is only a tiny shift away from support.
 - Support drops by 2%, but opposition grows by 5% to 17% overall.
 - Patterns of support and intensity generally follow the same patterns as in the “blind” support question.

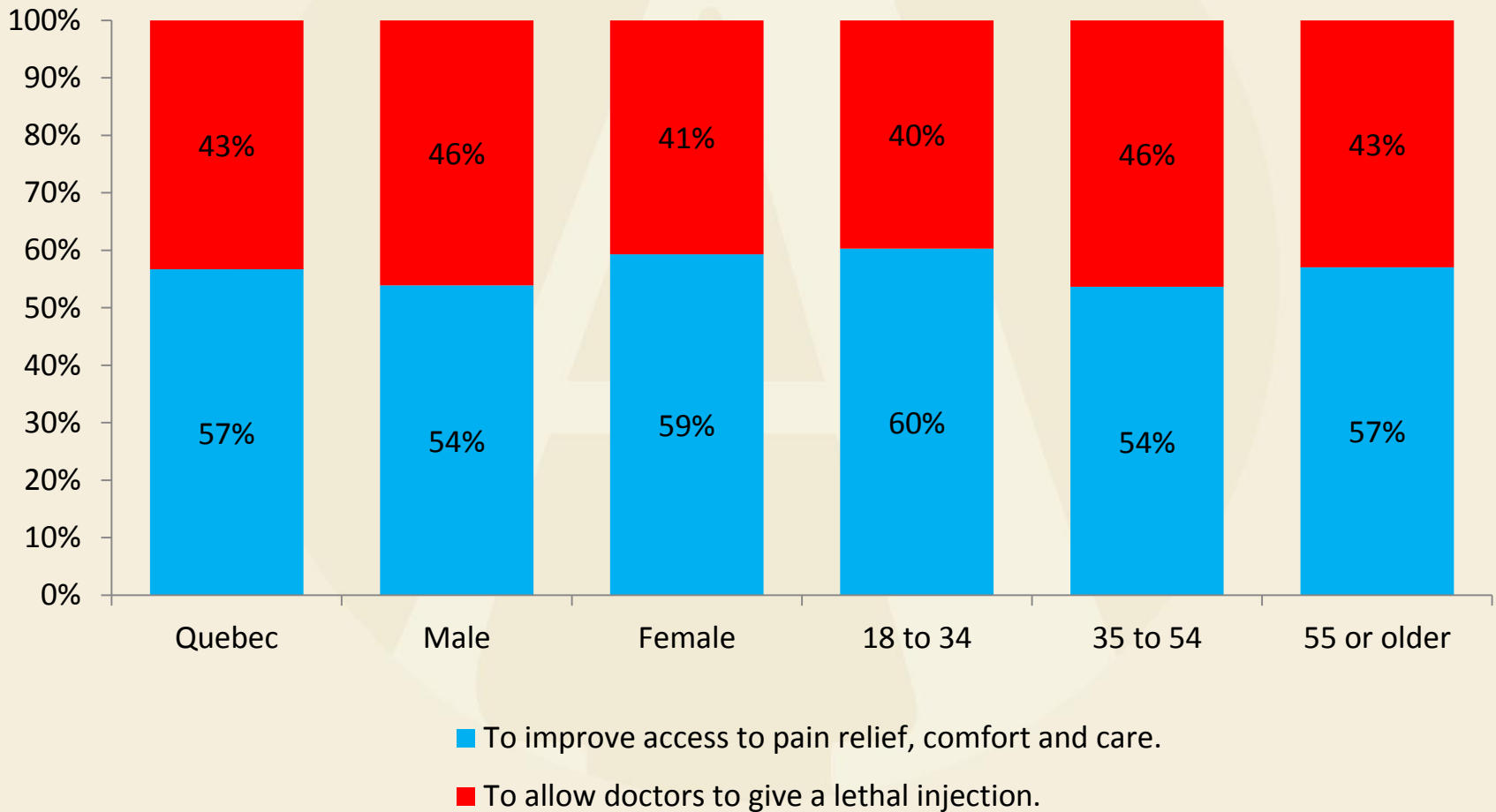
A large, stylized, light blue letter 'A' is centered on the page, set against a dark blue circular background. The 'A' has a unique, slightly irregular shape with a pointed top and a wide base.

PRIORITY FOR THE HEALTH CARE SYSTEM

Priority for the Health Care System

- Respondents were asked, for patients that were suffering from pain, what should the priority be for the health care system – either access to pain relief or letting doctors give a lethal injection.
- A majority (57%) think for pain relief should be the priority.
- There is more support for pain relief among women, young people, Liberal voters, English survey takers, people with university degrees, those who have only completed CEGEG and people for whom religion is very important

For dying persons who are suffering, what should be the health care system's priority?



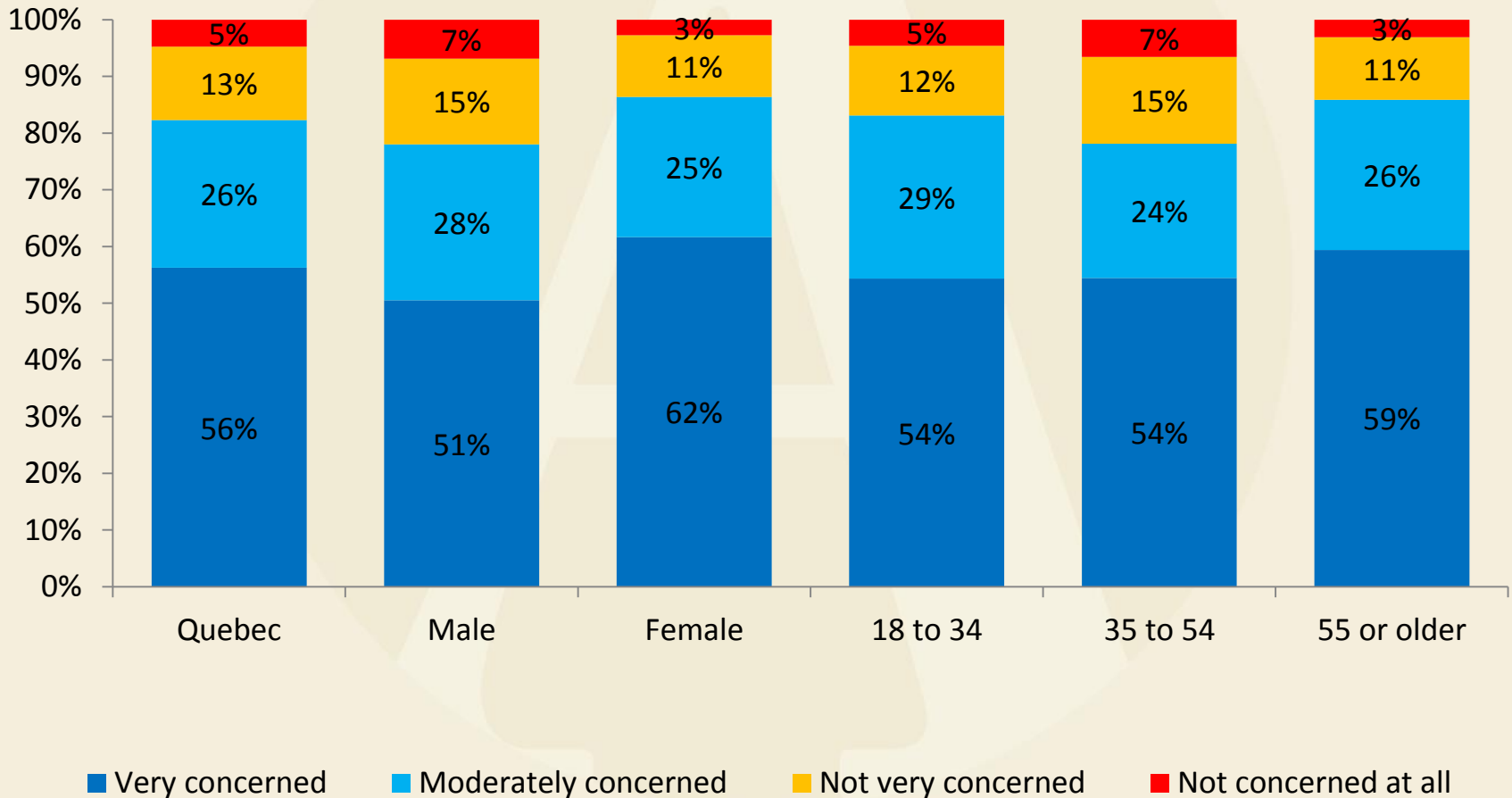
A large, stylized, light blue letter 'A' is centered on the page, set against a dark blue circular background. The 'A' has a unique, slightly irregular shape with a pointed top and a wide base.

CONCERNS

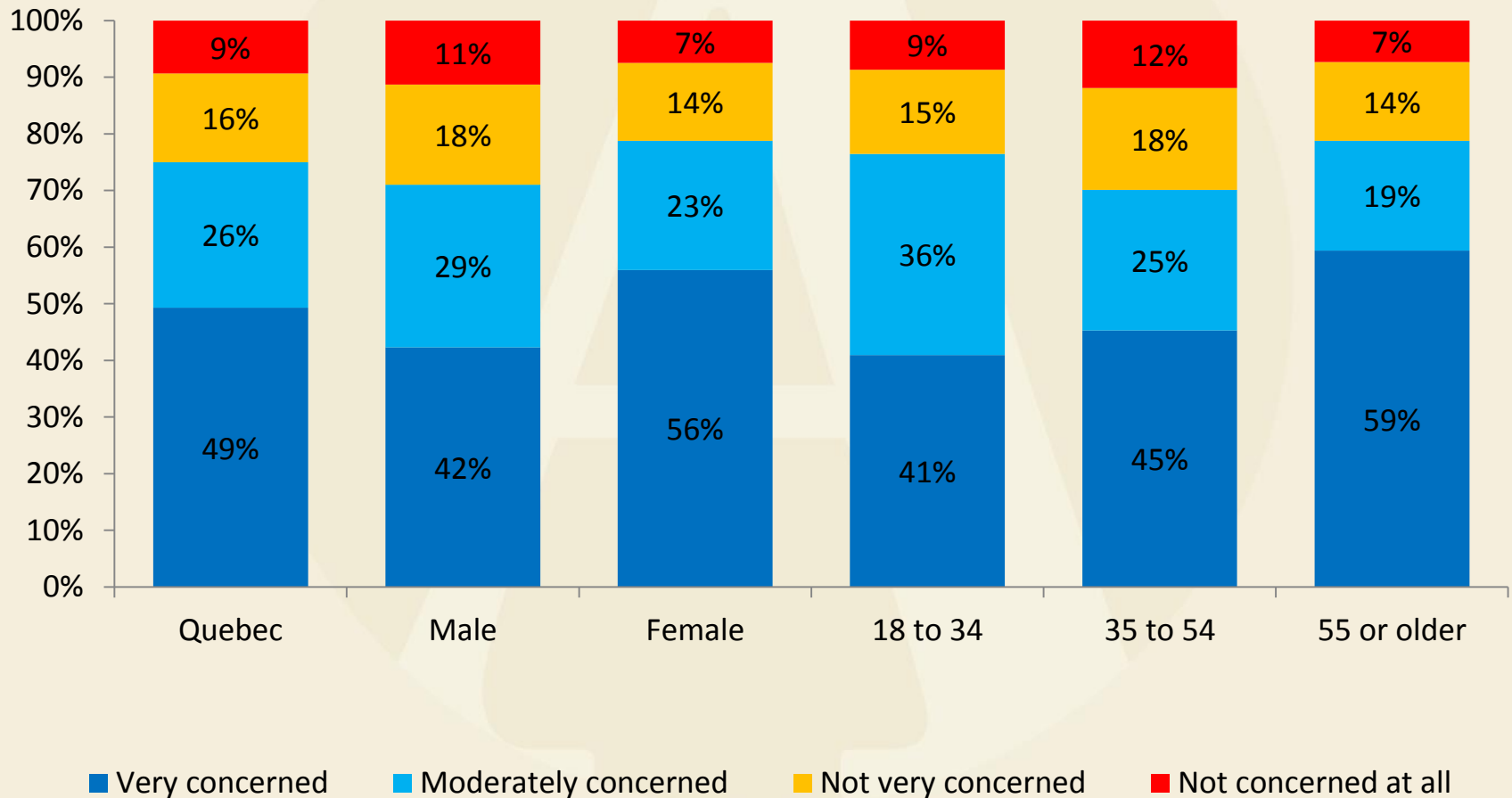
Concerns

- With some prefacing, respondents were presented with six scenarios that may occur if Bill 52 becomes law. These were based on the experience in Belgium with a similar law, and other concerns that have been raised.
- For each of the scenarios respondents were asked how concerned they were that something like this may happen in Quebec

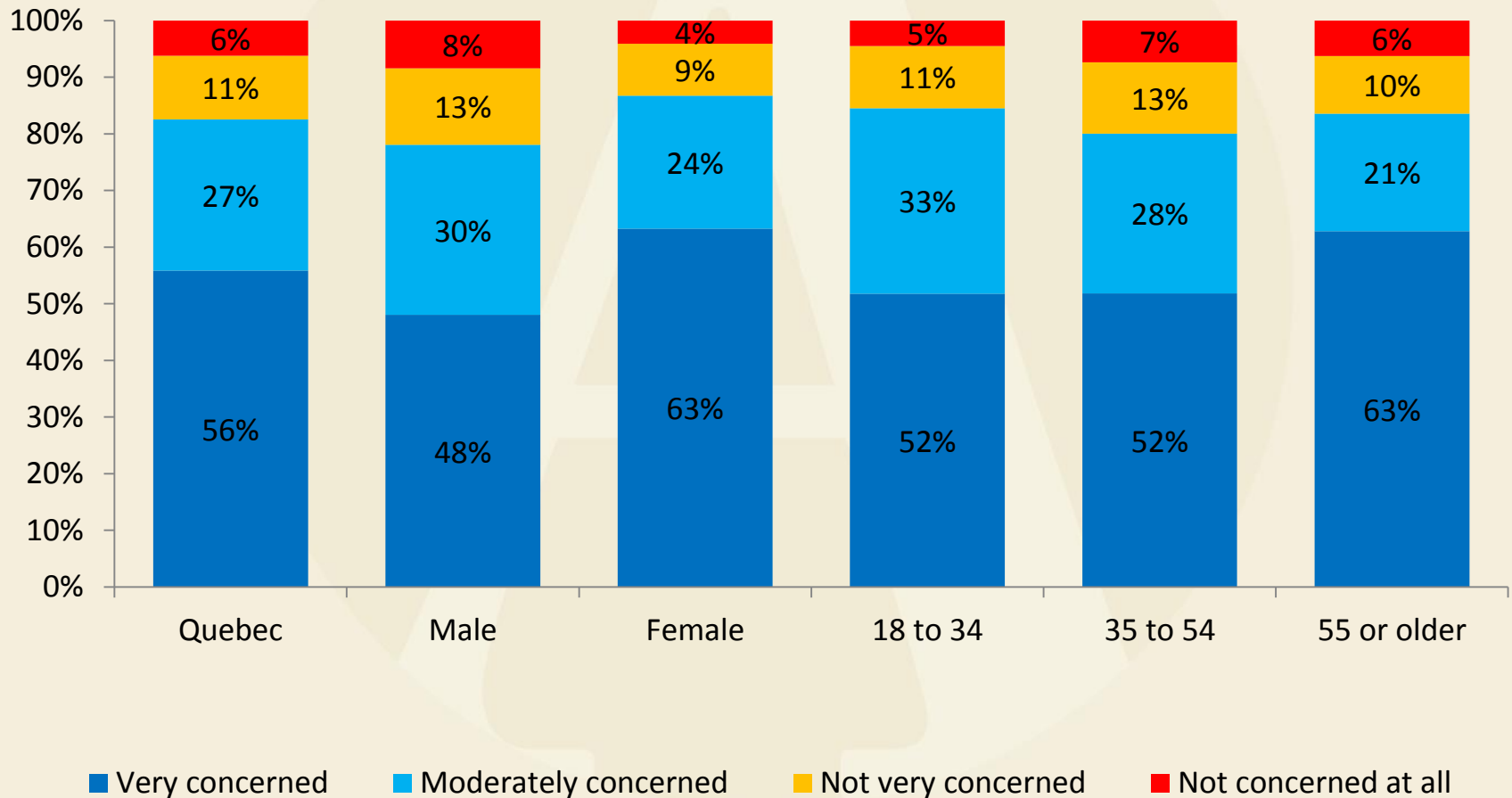
A significant number of sick, elderly, disabled, or mentally ill persons might eventually be killed without their consent



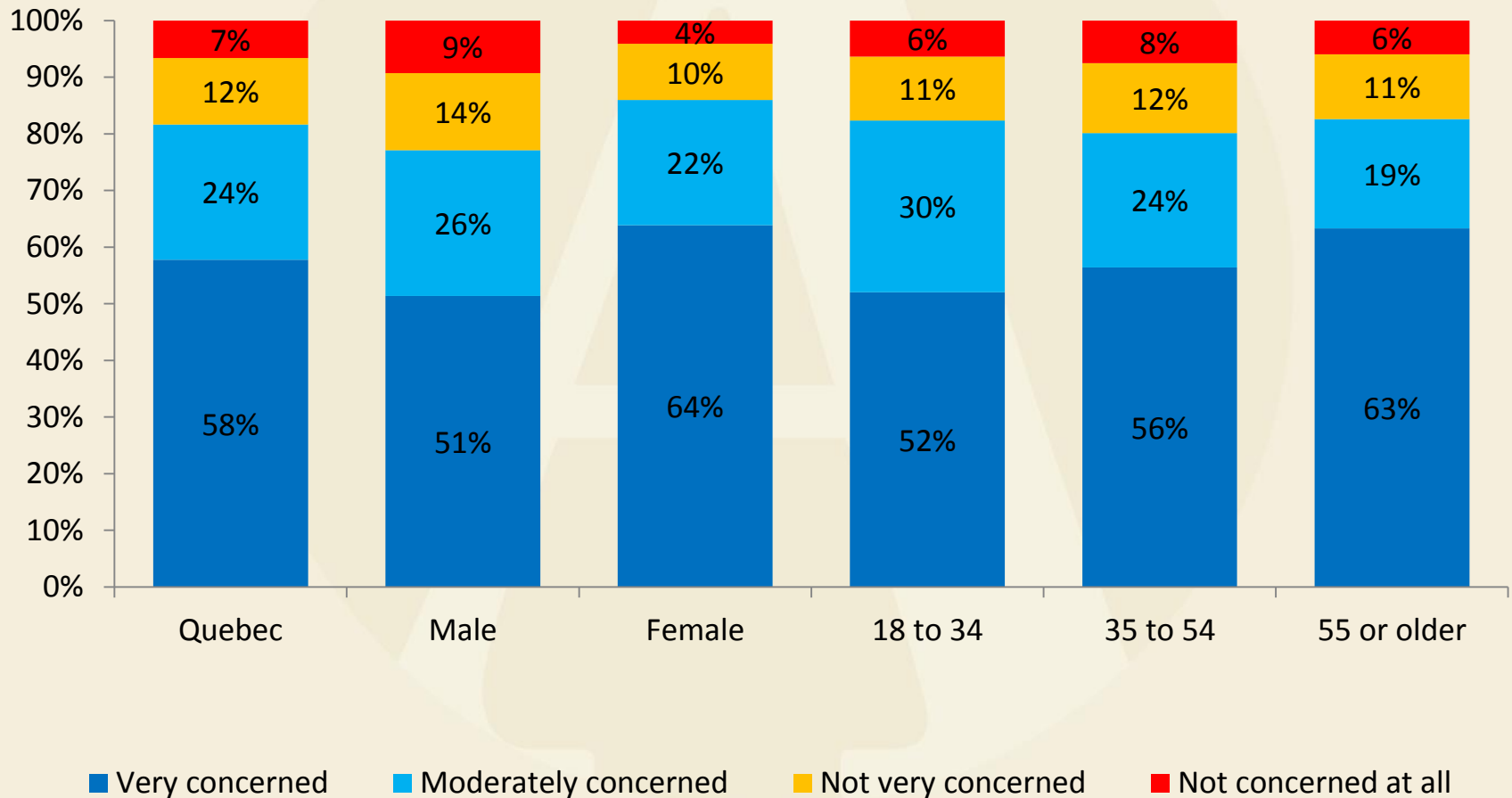
Otherwise healthy disabled people in Quebec may eventually seek to be killed through “medical aid in dying” due to being disabled



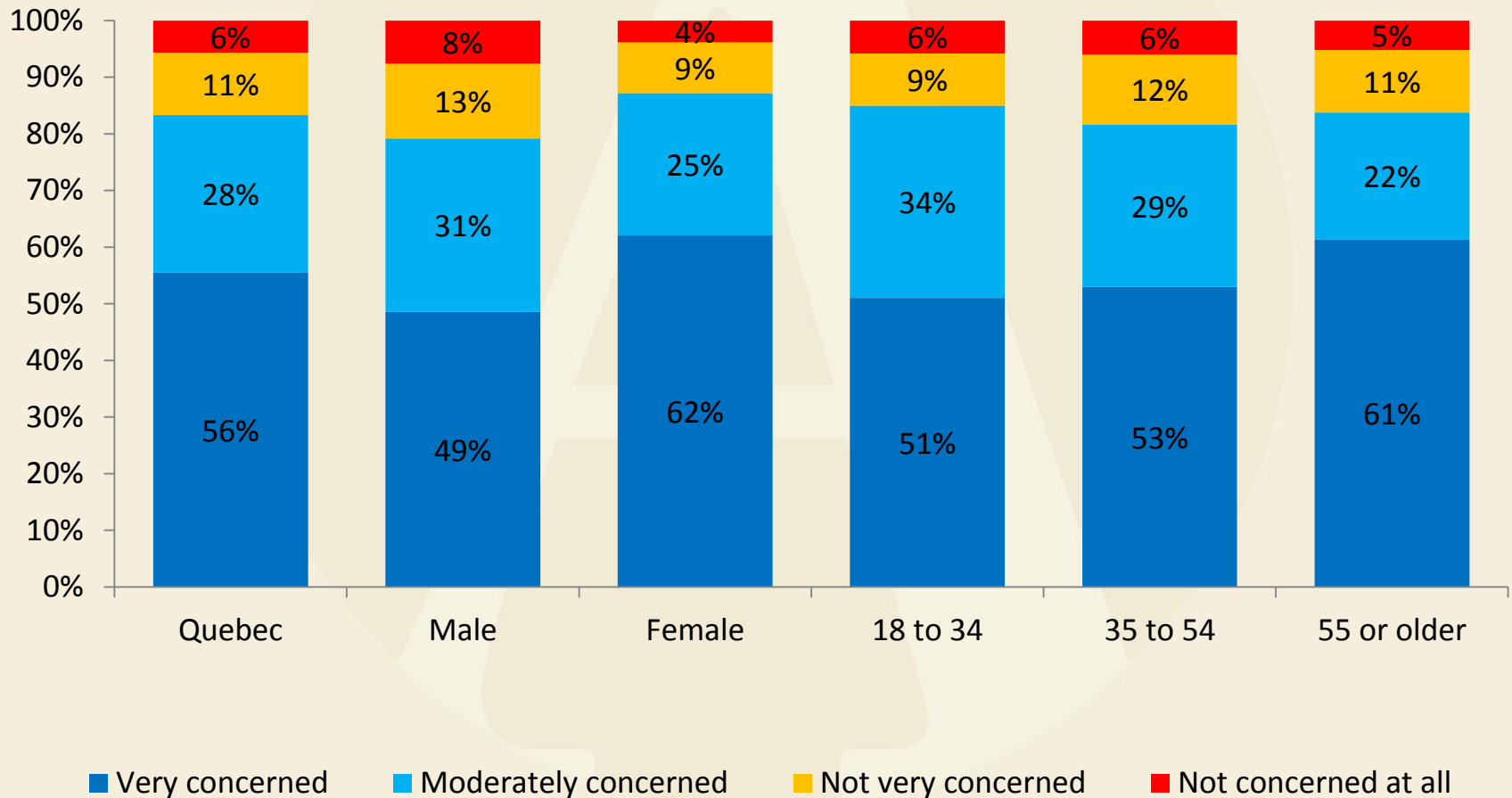
People with mental illness may eventually seek to be killed through “medical aid in dying” instead of obtaining the help they need



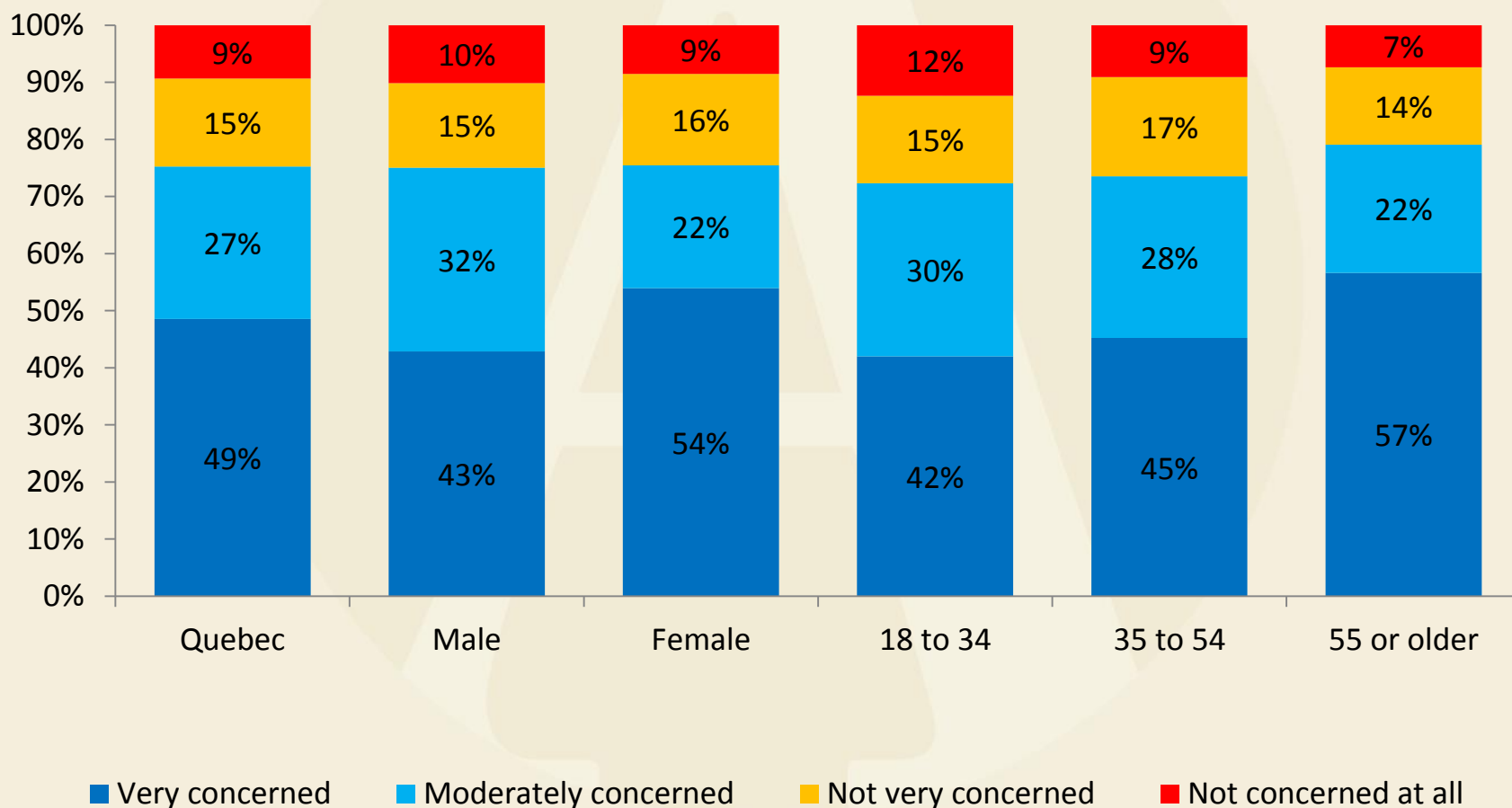
Suicidal teens in Quebec may eventually be killed through “medical aid in dying” instead of receiving the help they need



Some elderly people in abusive situations in Quebec may eventually be pressured to accept “medical aid in dying”



Some elderly people in Quebec may eventually feel pressured to accept “medical aid in dying,” in order to avoid being a burden on the health care system



Concerns

- At least 49% of Quebecers find every scenario “very concerning.”
- All six scenarios show a similar pattern of concern with, about, or slightly more than half of respondents being “very concerned” and slightly more than a quarter being “moderately concerned.”
- They are most concerned about the possibility of “medical aid in dying” being extended to suicidal teens.
- The next most concerning, with about the same patterns of concern, are seniors in abusive situations, healthy people with mental illness, and people without their consent being victims of “medical aid in dying.”
- The least concerning scenarios are people being pressured to accept it to avoid being a burden on the health care system, and otherwise healthy disabled people using it because they no longer wish to deal with their disability.

Concerns

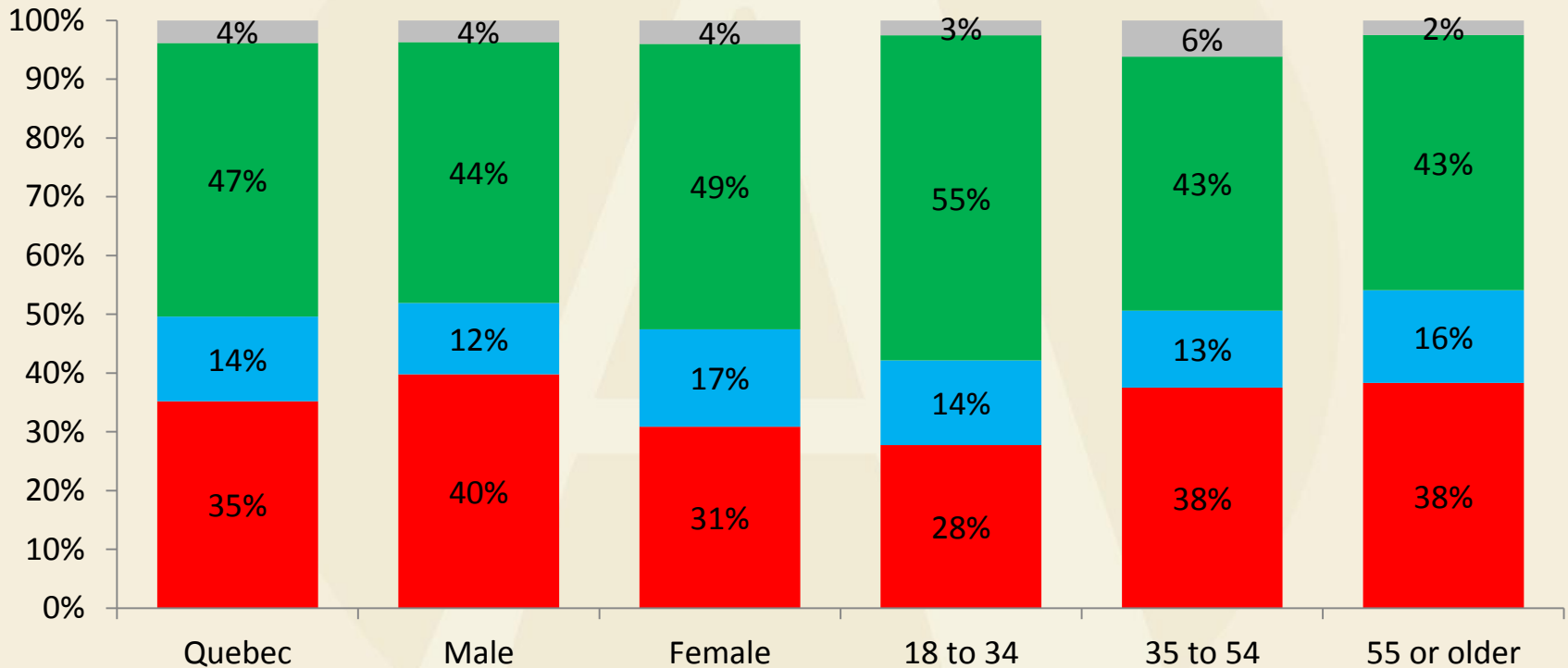
- Generally those people who are most concerned about these scenarios are defined by religion and age.
- People for whom religion is very important are the most concerned in all cases.
- Generally, people over 55 are more concerned than younger people. This patterns follows other demographics dominated by older people – such as PLQ voters, Catholics, and those with an education of High School or less.
- Women and people who took the survey in English are also more likely to be concerned than men and francophones.

FINAL VIEWS

Final Views

- After being exposed to the list of concerns, respondents were asked again what they think Quebec's government should do about "medical aid in dying."
- They were given the choices of legalization, not letting it be legalised and sending it for further study.
- A strong plurality (47%) believed it requires further study, while only 35% believed in legalization.
- People under 35, English survey takers and people with university degrees were the most likely to say it required further study.
- A plurality (42%) of people for whom religion is very important, oppose legalization altogether.

Final Views



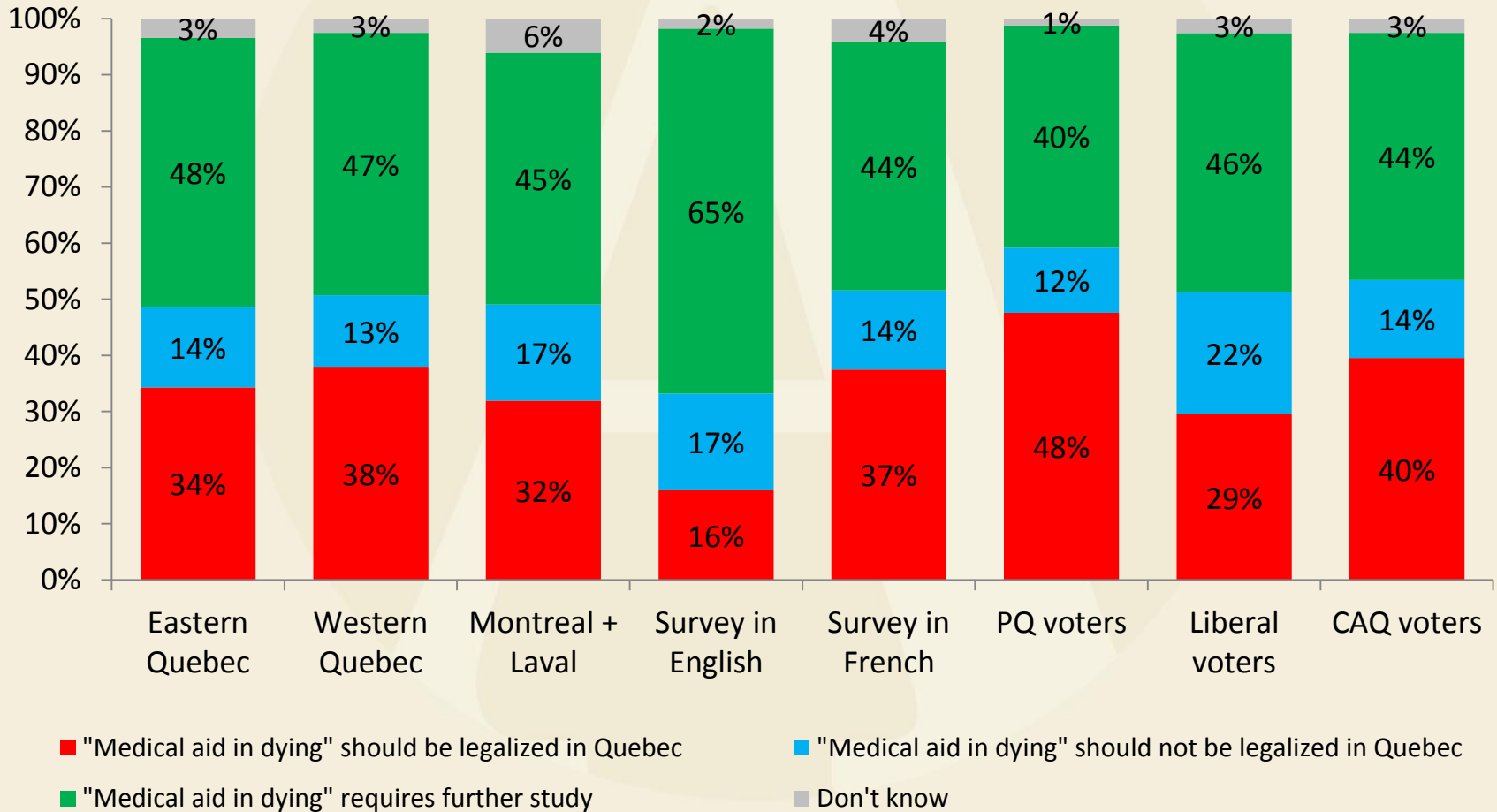
■ "Medical aid in dying" should be legalized in Quebec

■ "Medical aid in dying" should not be legalized in Quebec

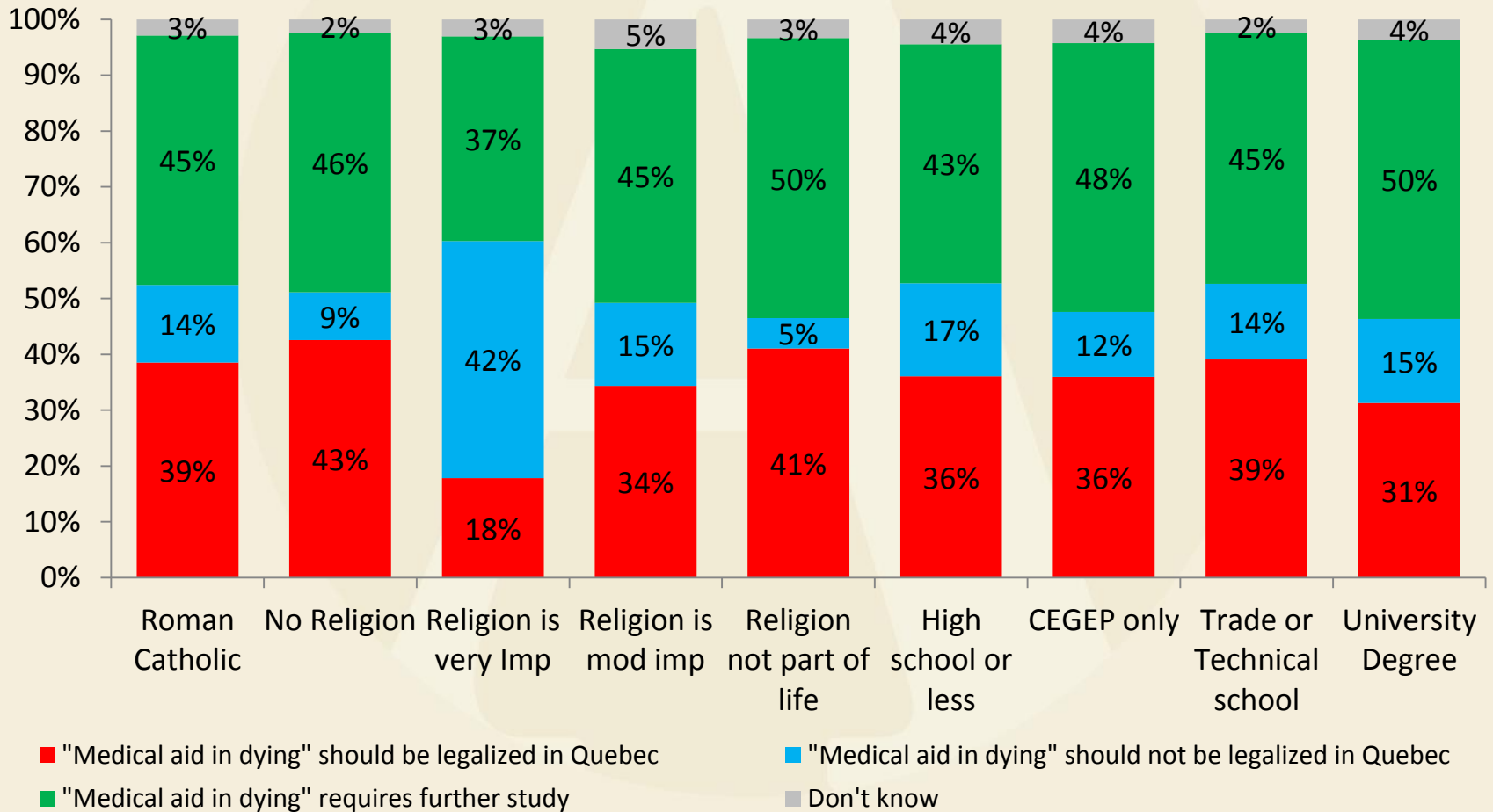
■ "Medical aid in dying" requires further study

■ Don't know

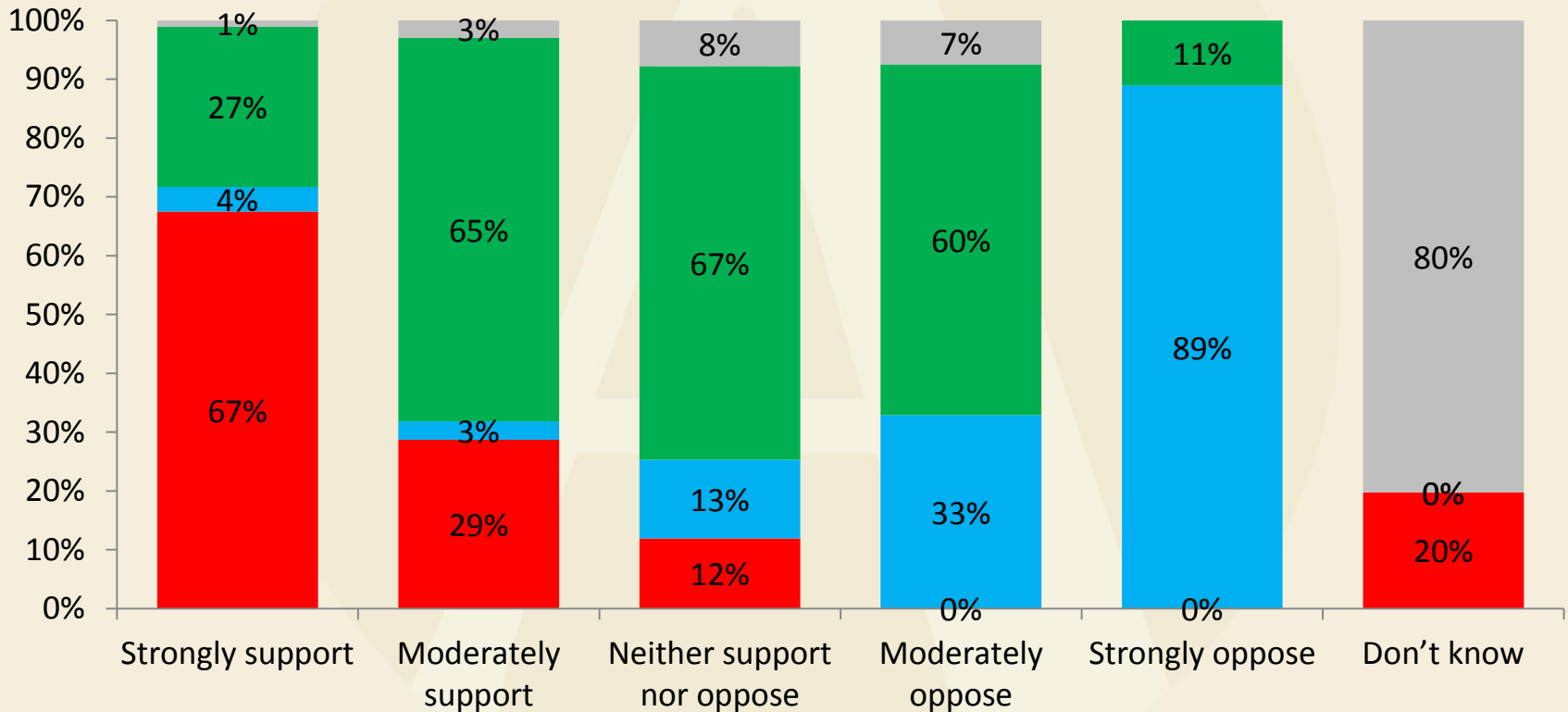
Final Views



Final Views



Final views by informed initial support



■ "Medical aid in dying" should be legalized in Quebec

■ "Medical aid in dying" should not be legalized in Quebec

■ "Medical aid in dying" requires further study

■ Don't know

A large, stylized, light blue letter 'A' is centered on the page, set against a dark blue circular background. The 'A' has a modern, geometric design with a horizontal bar and a slightly curved top.

APPENDIX: QUESTIONS ASKED

Appendix: Q1 – Q4

- Q1. The government of Quebec has recently introduced legislation to allow for “medical aid in dying.” In your opinion what does the phrase “medical aid in dying” mean? Please choose the option below that is closest to your own view.
 - Doctor-assisted suicide
 - A doctor gives a patient a lethal injection to end their life
 - Providing medical care to people with terminal conditions
 - Don’t know
- Q2. Based on what you know about “medical aid in dying,” do you support or oppose it?
 - Strongly support
 - Moderately support
 - Neither support nor oppose
 - Moderately oppose
 - Strongly oppose
 - Don’t know
- Q3. The Quebec government has introduced Bill 52 which would allow doctors under some circumstances to give patients lethal injections. Patients would be able to request to be killed if they have an incurable condition. This is called “medical aid in dying.” In Quebec, doctors have always been required to care for their patients and refrain from killing them. This new law would change that, letting doctors kill patients who requested it.
- Based on the information above about “medical aid in dying,” do you support or oppose it?
 - Strongly support
 - Moderately support
 - Neither support nor oppose
 - Moderately oppose
 - Strongly oppose
 - Don’t know
- Q4. Modern medicine has made great advances in relieving pain and in providing comfort and care to dying persons who are suffering. However, only a third of Canadians who need such measures actually receive them. In the case of dying persons who are suffering, which of the following in your opinion should be the health care system’s priority?
 - To improve access to pain relief, comfort and care.
 - To allow doctors to give a lethal injection.

Appendix: Q5 – Q10

- Q. Quebec’s proposed legislation on “medical aid in dying” is modelled on a law in Belgium. Since 2002 in Belgium a doctor has been allowed to kill a patient only if the patient has an incurable condition and requests it. The Belgian experience over the last 11 years may provide an example of what will eventually happen in Quebec if Bill 52 becomes law.
- Below are a series of statements about possible consequences of Bill 52 based on the Belgian experience – for each one please indicate how concerned you are that these kinds of things might eventually come true in Quebec.
 - Very concerned
 - Moderately concerned
 - Not very concerned
 - Not concerned at all
- Q5. A study in Belgium found that, in violation of the law, one-third of patients given a lethal injection did not request or consent to it. If Bill 52 becomes law a significant number of sick, elderly, disabled, or mentally ill persons might eventually be killed without their consent.
- Q6. In Belgium in 2012, 45 year-old deaf twin brothers obtained a lethal injection after they learned they were both going blind. The brothers, who were not dying, sought an injection because they no longer would be able to see one another. If Bill 52 becomes law, otherwise healthy people with a disability in Quebec may eventually seek to be killed through “medical aid in dying” due to their experience of being disabled.
- Q7. In 2012 a 64 year-old Belgian woman who suffered from chronic depression, and was upset because a long-term relationship with her boyfriend had ended, obtained a lethal injection. If Bill 52 becomes law individuals with some form of mental illness may eventually seek to be killed through “medical aid in dying” instead of obtaining the help they need.
- Q8. The original Belgian law, like Bill 52, did not allow a doctor to administer a lethal injection to a person under 18 years of age. However, Belgium is now considering amending its law to include people under 18 who request it. If Bill 52 becomes law suicidal teens in Quebec may eventually be killed through “medical aid in dying” instead of receiving the help they need.
- Q. Some people have expressed concerns that the system allowed under Bill 52 would be open to abuse.
- Below are some statements about possible consequences of Bill 52 – for each one please indicate how concerned you are that these kinds of things might eventually come true in Quebec.
 - Q9. Elder abuse is recognized as a growing problem. Elder abuse is abusive or controlling behaviour by a person in a position of trust - such as a family member or caregiver - that causes an older adult physical or emotional harm, or loss of property or assets. If Bill 52 becomes law some elderly people in abusive situations in Quebec may eventually be pressured to accept “medical aid in dying.”
 - Q10. The government in Quebec is trying to find ways to limit the rising cost of health care. We have an aging population and older people have more health needs. If Bill 52 becomes law some elderly people in Quebec may eventually feel pressured to accept “medical aid in dying,” in order to avoid being a burden on the health care system.

Appendix: Q11

- Q11. Since “medical aid in dying” means that a doctor would be able, under some circumstances to kill patients through a lethal injection, which of the following best represents your opinion:
 - “Medical aid in dying” should be legalized in Quebec
 - “Medical aid in dying” should not be legalized in Quebec
 - “Medical aid in dying” requires further study
 - Don’t know [FIX POSITION]



Hamish I. Marshall
Chief Research Officer
Abingdon Research
www.abingdon.ca