



This is the 1st affidavit
of Hollis Johnson in this case
and it was made on 24 Aug 2011

No. S112688
Vancouver Registry

IN THE SUPREME COURT OF BRITISH COLUMBIA

BETWEEN:

LEE CARTER, HOLLIS JOHNSON, DR. WILLIAM SHOICHET, THE BRITISH
COLUMBIA CIVIL LIBERTIES ASSOCIATION and GLORIA TAYLOR

PLAINTIFFS

AND:

ATTORNEY GENERAL OF CANADA

DEFENDANT

AND:

ATTORNEY GENERAL OF BRITISH COLUMBIA

INTERVENOR

AFFIDAVIT

I, **HOLLIS JOHNSON**, of the Village of Fort Langley, in the Province of British Columbia,
SWEAR (OR AFFIRM) THAT:

1. I am the second-named plaintiff in this action and as such have personal knowledge of the facts and matters hereinafter deposed to, save and except where same are stated to be made on information and belief, and where so stated, I verily believe them to be true.

2. I am married to the first-named plaintiff in this matter, Lee Carter ("Lee"). Lee and I have been married since 1985. Kathleen Carter was Lee's mother and my mother-in-law. Kathleen generally went by "Kay" and is so identified in the Amended Notice of Claim in this proceeding. I, however, I always called her "Katy" and will use that name in this my Affidavit.

3. Katy died on January 15, 2010, at the Dignitas clinic in Forch, Switzerland. Her death was caused by the voluntary ingestion of a lethal dose of sodium pentobarbital prescribed for that purpose by a qualified Swiss physician. I was there with Lee and her brother, Price, and sister, Marie, at the time she took the drug and at the moment of her death.

4. Katy was an intelligent, thoughtful and strong-minded woman. She was a regular viewer of McNeil/Lehrer news hour and the Charlie Rose show on PBS. She was interested in news and politics and enjoyed talking about these and other matters.

5. She was also very interested in travel and other cultures and as a result travelled widely throughout her life. Her love for adventure took her to pretty much every continent (save Antarctica) and while she preferred travelling in the company of others, she was not adverse to travelling alone.

6. Her unbridled enthusiasm for life also led her on journeys closer to home - like eagle watching along the Harrison & Squamish Rivers, inaugural events like the public walk through the Cassiar Connector upon its completion, or crossing historic low tides in White Rock. In such matters, she sought the company of other curious souls as a kind of celebration of life.

7. When I first met Katy, she was widowed and living in the then family home on Glenview Crescent in North Vancouver. Lee and I lived with her there for a time, until we could get a place of our own. At the time, I was a graduate student in Criminology at SFU. What impressed me most about Katy during our time together in that house was her intellectual curiosity and attentiveness. Late evenings at the SFU library were often punctuated with lively animated discussions about my thesis over a glass of Cointreau on my return home. Katy was a great conversationalist and loved spirited and reasoned debate. Graduate School was not easy for me. In fact, there were times when, if it were not for Katy and her interest in what I was doing, I might have dropped out of the program altogether. Katy and I had a deep affection for one another - I dedicated my dissertation to her - and remained the best of friends right up to the end of her life.

8. What always impressed me most about Katy was the range of her intellectual curiosity, the clarity of her thought and the firmness with which she held her convictions. In short, Katy

was and, continued right up until her death, an independent thinker. Following her initial complaints of pain and numbness in early 2008, Katy's physical condition deteriorated steadily and rapidly. However, her mind stayed sharp throughout.

9. It was the prognosis of being entombed in bed flat like a board completely devoid of human agency that galvanized Katy's thinking in July of 2009. I could see that the news had had a profound impact on her and she later told us as much when expressing her wish to die with dignity. When Katy told us of her wishes she indicated that the spectacle of a lingering death and loss of autonomy terrified her, and that she preferred a good death over indignity. She expressed her wishes in firm, clear and rational terms. Knowing her as I did, it was more than clear to me that she was both earnest and determined.

10. Being incontinent was extremely debilitating for Katy. Initially, while she still retained some mobility, it was the fact of being incontinent that restricted her from attending the many cultural events (plays, movies & symphonies) that she had always so loved to attend. She said that having to attend in diapers was too embarrassing to bear. Later on, when her mobility was even more restricted and she had no control over her bowel and urinary functions and had been rendered totally reliant on the care of others at the Lynn Valley Care Center, she indicated that she felt that her personal privacy was in almost constant violation. Indeed, cleanliness became such an ordeal for Katy that, in the end, she retained the services of a personal health worker, at her own expense, to ensure that her bathroom and hygienic needs would be dealt with in a sensitive and timely fashion. For Lee and I, it was not until Zurich, when she was totally in our care, that we finally realized and appreciated what a traumatic, embarrassing and difficult ordeal it was for her to have to be assisted in these matters, even by us. For Katy being incontinent appeared to be a constant and vivid reminder of her dependence on others; something she truly seemed to loathe, which I did not find surprising, since it was so foreign to what I knew to be her proud and independent nature.

11. Being trapped in her increasingly dysfunctional body while still in possession of a sound mind was extremely difficult for Katy. With her failing body she was no longer able to hold a newspaper, switch a TV channel or turn on the radio, Katy was deprived of much of the social and intellectual stimulation she had always previously sought out. In effect, her physical

shortcomings managed to deprive her of the thing that had arguably given her the greatest pleasure – intellectual stimulation and reasoned debate on topics she considered important. Katy's desperation to maintain contact with the outside world was illustrated by her decision to hire (again at her own expense) a remarkable woman who took dictation from her three days a week. Lee and I came in on weekends armed with newspapers and other reading materials to keep her mind active, but once we were not there to read them aloud or hold and turn them for her, Katy would be once again deprived. For Katy her situation was an intolerable one - a situation she frequently referred to as "death by instalment".

12. I was not surprised by Katy's decision to have a physician-assisted suicide. It was a decision consistent with the values and principles she had espoused the entire time I had known her.

13. Katy's conduct and statements had always shown her to be a pragmatist at heart, in my opinion. She had demonstrated many times over the years I knew her that she was a person who evaluated pretty much everything in life in terms of practical requirements and ensuing consequences. Toward the end of her life, Katy said that she had accomplished pretty much everything she had set out to do. And I believe she truly had: she successfully raised seven children, acquired a university degree (a major accomplishment for a woman of her time), became a consummate world traveller and an accomplished musician; and had engaged socially and civically with the world around her to make it a better place. In full view of her diminished existence, Katy expressed the sincere conclusion that her life was no longer worth living. Katy made the decision that her time was up (a realization she described as an epiphany) in the middle of the night in July 2009, and she never once waivered afterward in her resolve to see her wish through. Indeed on the way to Zurich, Katy pointedly reminded me that the entire trip was to remain a "larky event".

14. Katy wanted to end her life in Canada, but was aware that assisting suicide is a criminal offence in Canada. Katy asked Lee for our support and assistance in arranging an assisted suicide for her in Switzerland. Lee and I discussed the fact that assisting Katy could expose us to criminal charges in Canada. We felt that the law was wrong and unjust. We did not (and do not) want to be sent to jail or be otherwise subjected to criminal penalty for what we did. We are well

aware that there is no statute of limitations on criminal prosecutions in Canada and continue to be concerned that we could yet be charged. We feel that there are unresolved potential legal consequences hanging over our heads. However, we did not hesitate to take the risk that we might be prosecuted if we helped Katy fulfil her wish. There was no need to ponder the costs and benefits of our assisting; it was just too important to Katy.

15. I was still teaching at the time much of the preparatory work was happening, so the majority of the planning and arranging for going to Switzerland and Dignitas was done by Lee. But I gave Lee all the moral support I could through the many hurdles and roadblock of the process. I helped directly where I could, for example, with the mailing and picking-up of relevant documents (birth and death certificates, CT and MRI reports, and so on). Occasionally, I assisted Katy with travelling to and from doctor's offices for required information or reports, and I tried to be present during the critical junctures in the quest to go to Zurich.

16. During this time, Katy could feel the progression of her paralysis as it moved throughout her body and she began to express her concern that her rapidly deteriorating condition might rob her of the opportunity to have a good death. When Katy became despondent with the length and tediousness of the planning process, I arranged fun family things to occupy her thoughts (e.g., summer picnics at Cates Park, Ice-Cream Sundaes on Sunday in Katy's room and occasional car outings to Brackendale or Harrison Mills to eagle watch). And, of course, I accompanied Katy on her final journey to Switzerland and performed my assigned role of "doc" in dispensing her many medications while on the trip.

17. Both Lee and I found the planning and arrangement process was extremely trying. We would often discuss this. Up until this point in time, we had prided ourselves on being honest and forthright people. Now, however, because what we were doing constituted a criminal offence in Canada, we had to act covertly and out and out lie to people. To illustrate my point, when we were provided the January 15 date by Dignitas, we had to provide the care facility with a justification for taking Katy out of their care. We decided that a partial truth might work best (i.e., to say that we were taking Katy to visit her sister in Toronto). It was difficult for me personally to have to deliberately be dishonest to the nurse in charge on the day we left for Zurich, but we had to be in order to secure Katy's release and get her medications for the trip.

Katy, in providing an excuse for her departure, also had to be dishonest with the many residents and staff she had befriended while at the Lynn Valley Care Center. These individuals were obviously robbed of the opportunity to say their good-byes, and we subsequently learned that some ultimately learned Katy's real destination through a newspaper article and felt betrayed.

18. Lee, Marie, and I all travelled to Switzerland with Katy. We arrived in Switzerland on the Monday of the week of January 15, 2010. Price joined us on the Wednesday of that same week. Boy, were we ever happy to see him. We stayed in Zurich, as that was Katy's preference, and all travelled out to Forch together by taxi when the time came to go to Dignitas.

19. On January 15, 2010, Lee, Marie, Price and I went with Katy to the Dignitas clinic. At the clinic, a Dignitas staff member, "Erica", repeatedly asked Katy whether she still wanted to terminate her life. Katy answered positively and emphatically each time she was asked and expressed a desire to do so without any further delay.

20. After Katy said that she would like to get started, Erica gave Katy a medication to settle her stomach. About 30 minutes later, Katy was moved from her wheelchair to a bed in the room and we all moved to sit beside her, with our arms around Katy and each other. Erica brought Katy the prescribed sodium pentobarbital dissolved into liquid in a drinking glass. As Katy's hands were no longer reliable, Erica held the glass for Katy so Katy could drink using a straw. Katy drank quickly. The Swiss physician had recommended that Katy be given some chocolate to cut the bitterness, so Lee had bought some Swiss chocolate for us all and brought it from Zurich. After Katy drank the liquid, we each had some chocolate with Katy.

21. Katy was unconscious within minutes after drinking the liquid. As Erica told us that Katy could hear people speaking, Lee, Marie and Price reminisced aloud about their father and other family memories. After about 20 minutes, Katy was gone.

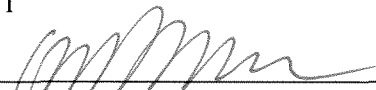
22. Lee and I have experienced censure and criticism from some third parties for our actions in assisting Katy. Katy's trip to Dignitas has been subject to media coverage and some of the posted comments have been critical. While we have received much support and sympathy from our own community and friends, we are aware that there are people who publicly equate what we did for Katy with "elder abuse" and "killing". Attached hereto and marked as **Exhibit A** to this

my Affidavit is a true copy of a print off of an excerpt from the blog posting of Alex Schadenberg, the executive director of the Euthanasia Prevention Coalition - Canada. <http://alexschadenberg.blogspot.com/search/label/Assisted%20Suicide>.

23. I believe that Katy ought to have been able to obtain an physician-assisted suicide here, in Vancouver, surrounded by as many of her family and friends as she wished and ought not to have been required to go through the gruelling stress and uncertainty involved in arranging for a physician-assisted suicide in Switzerland.

24. I want the option of being able to arrange and legally obtain, in Canada, physician-assisted dying services for myself, for Lee and for other persons I love, in the event that I or any other loved one should suffer a grievous and irremediable illness and wish to end the suffering and die with dignity.

SWORN (OR AFFIRMED) BEFORE ME)
at Vancouver British Columbia, on 24 Aug)
2011)



A Commissioner for taking Affidavits for)
British Columbia.)




HOLLIS JOHNSON

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Euthanasia Prevention Coalition

This is Exhibit A referred to in the Affidavit of Hollis Johnson sworn (or affirmed) before me on 24 Aug 2011.


A Commissioner for taking Affidavits for British Columbia

Showing newest posts with label **Assisted Suicide.**
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Wednesday, August 17, 2011

Farewell Foundation case rejected. BCCLA case is a recipe for elder abuse.

The Vancouver Sun reported that the case by the Farewell Foundation, a group in BC that is trying to legalize assisted suicide, was thrown-out by Justice Lynn Smith. The Farewell Foundation was attempting to legalize "Swiss style" assisted suicide in Canada, which means that they wanted the law to allow doctors and other people to be able to assist a suicide.

A couple of weeks ago, Justice Smith fast-tracked the case by the BC Civil Liberties Association (BCCLA). The BCCLA is representing the family of Kay Carter, who died by assisted suicide at the Dignitas suicide center in January 2010, and Gloria Taylor, who lives with ALS. The BCCLA case is attempting to legalize euthanasia and assisted suicide, via the court, in Canada



Laura Kane, who wrote the article for the Vancouver Sun stated:

Justice Lynn Smith ruled the foundation did not have a strong enough case to challenge the law, saying anonymous members of the group must identify themselves in order to prove the law directly affects them.

However, Smith invited the group to apply to intervene in a parallel right-to-die case led by the B.C. Civil Liberties Association.

The Farewell Foundation for the Right to Die had argued that the law against assisting suicide — which carries a maximum penalty of 14 years in prison — violates its members' right to die with dignity in the future.

Of the group's 117 members, only five were identified as plaintiffs in the case. One of the plaintiffs committed suicide in July.

Donnaree Nygard, lawyer for the federal attorney-general, argued the case was "hypothetical" because the plaintiffs were not facing criminal charges for assisted suicide.

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Euthanasia Prevention Coalition

The Farewell Foundation of BC case is rejected. The BCCLA case is a recipe for elder abuse.

Link:
<http://alexschadenberg.blogspot.com/2011/08/farewell-foundation-case-rejected.html>



Euthanasia Prevention Coalition: Farewell Foundation case BCCLA case is a recipe for elder abuse
alexschadenberg.t

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Farewell Foundation lawyer Jason Gratl said the group attempted something new by challenging a law on behalf of anonymous members, and was unsuccessful.

"Justice Smith found that if the Farewell Foundation wished to bring a constitutional challenge, the members whose health is deteriorating must identify themselves," he said.

Russel Ogden, a founding director of the Farewell Foundation, said he was encouraged by the invitation to intervene by Smith, who is also overseeing the BCCLA case.

"I would compare it to someone in a race who knocks over a hurdle," Ogden said. "It hurts a bit, you lose a few seconds, but you're still in the race. You don't give up."

If its application to intervene is approved by the court, the foundation would be able to advance many of the same arguments it would have presented in its challenge to the Criminal Code, Ogden said.

A party with intervener status may introduce evidence and cross-examine witnesses.

The BCCLA-led case was recently fast-tracked due to the failing health of plaintiff Gloria Taylor, 63, suffering from late-stage amyotrophic lateral sclerosis, also known as Lou Gehrig's disease. The trial is set to begin Nov. 15.

The case proposes a medical model that restricts the assisted-suicide procedure to medical professionals. The Farewell Foundation, on the other hand, advocates the Swiss model, in which right-to-die organizations oversee the procedure.

"Many of our members do not see this as a medical procedure, and do not want it to occur in a clinical setting," Ogden said.

Last year the Parliament of Canada rejected Bill C-384 that was sponsored by Francine Lalonde (BQ) which would have legalized euthanasia and assisted suicide, by a vote of 228 to 59. Since then an all-party committee of members of parliament have been working on a report to suggest ways that Canada needs to improve its care in the areas of: Palliative Care, Suicide Prevention, Elder Abuse and Disability issues. The Parliamentary Committee on Palliative and Compassionate Care will release their report in November 2011.



The Euthanasia Prevention Coalition (EPC) is seeking intervener status in the BCCLA case. EPC expected that the Farewell Foundation case would be thrown out because it lacked standing in relation to how serious it is to legalize euthanasia and assisted suicide.

The Farewell Foundation case attempted to legalize, "Swiss style" assisted suicide while the BCCLA (Carter/Taylor) case is attempting to legalize euthanasia and assisted suicide via the court.



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Euthanasia Prevention Coalition

<http://www.epcc.ca/>

About Me



ALEX SCHADENBERG

Alex Schadenberg is the executive director of the Euthanasia

Prevention Coalition - Canada, the Chair of the Euthanasia Prevention Coalition - International Website: www.epcc.ca, Email: info@epcc.ca, Call: 1-877-439-3348.

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The EPC recognizes that the laws that prohibit euthanasia and assisted suicide are designed to protect people in the most vulnerable time of their life.

The EPC rejects the concept that it is necessary to legalize euthanasia and/or assisted suicide in order to ensure a "death with dignity".

EPC also understands that societal attitudes will lead to people with disabilities being steered towards death by euthanasia and elders who are vulnerable or being abused by family members or care-givers will be subtly pressured to die. These people will not "freely choose" but rather they will be coerced into dying by others who the person has been manipulated by and who that elderly person is dependant upon.

Posted by Alex Schadenberg at 10:21 PM 0 comments

Labels: [Assisted Suicide](#), [BC Civil Liberties Association](#), [Elder Abuse](#), [EPC](#), [euthanasia](#), [Farewell Foundation](#), [Gloria Taylor](#), [Kay Carter](#), [Parliamentary Committee](#)

BC Judge fast-tracks euthanasia and assisted suicide case in Canada



On August 4, the Euthanasia Prevention Coalition (EPC) reacted to the decision by Justice Lynn Smith, to fast-track the (Carter/Taylor) case which challenges Canada's laws that protect vulnerable people from euthanasia and assisted suicide. This update provides further information.

Justice Smith, agreed to fast-track a challenge to Canada's euthanasia and assisted suicide laws by the BC Civil Liberties Association (BCCLA) who are representing Gloria Taylor and the family of Kay Carter, the (Carter/Taylor) case. The case will be heard starting on November 15, 2011.

Last year, [Canada's parliament rejected Bill C-384](#) that would have legalized euthanasia and assisted suicide by a vote of 228 to 59. After losing the political debate, the right to die lobby is bringing their demand for legalized killing to the courts.

The BCCLA claims that euthanasia and assisted suicide can be legalized with strict safeguards.

A study, published in the CMAJ (May 2010) [found that 32%](#) of the euthanasia deaths in Belgium were done without request or consent. Another study published in the BMJ (Oct 2010) [found that only 52.8% of the euthanasia deaths in Belgium were reported.](#)

In Oregon, where assisted suicide is legal, [the overall suicide rate has climbed since 2000 and is now 35% higher than the national average.](#) At the same time people, such as [Barbara Wagner & Randy Stroup](#), who were denied medical treatment by the

[Rasouli decision being appealed to the Supreme Cou...](#)

[Ottawa will not legalize euthanasia or assisted su...](#)

[Massachusetts - Drive begins to put assisted suici...](#)

[BC Court fast-tracks challenge to assisted suicide...](#)

- ▶ July (19)
- ▶ June (14)
- ▶ May (30)
- ▶ April (18)
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- ▶ 2010 (232)
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Labels

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- [Baxter](#) (11)



In the previous parliamentary session, Harold Albrecht, Member of Parliament from Kitchener-Conestoga, introduced Motion 388 to ensure that Canada's assisted suicide act also applies to Internet Suicide Predators, such as Melchert-Dinkel. Motion 388 passed in the House of Commons unanimously.

EPC will urge the government to bring forth a bill that clarifies that Internet Suicide Predators, and those who counsel suicide via communications devices, will be prosecuted under Canada's assisted suicide act.

For more information about the Melchert Dinkel case go to: [Link](#)

Posted by Alex Schadenberg at 10:27 AM 0 comments

Labels: [Assisted Suicide](#), [Internet suicide sites](#), [Motion 388](#), [Nadia Kajouji](#), [William Melchert-Dinkel](#)

Friday, April 29, 2011

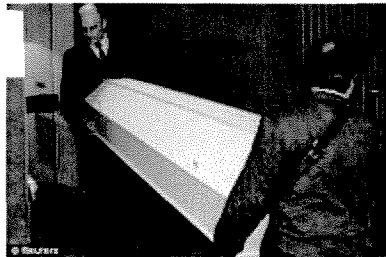
Euthanasia Prevention Coalition to intervene in a BC court case that threatens to legalize euthanasia and assisted suicide in Canada.



The BC Civil Liberties Association (BCCLA) has launched a court challenge (the Carter case) to overturn Canada's prohibition of assisted suicide and euthanasia. The Euthanasia Prevention Coalition (EPC) will intervene, when appropriate, in the case. EPC believes that the case should not be given standing by the court; however, if the case proceeds EPC

will seek intervention status.

The case is based on Kay Carter, who was diagnosed with spinal Stenosis in 2008. Kay was a member of the euthanasia lobby for many years, and was brought to Switzerland in January 2010, by her daughter Lee Carter and son-in-law Hollis Johnson. She died by assisted suicide at the Dignitas suicide clinic in Zurich. Lee and Hollis claim that they technically broke the law. The case also includes Dr. William Shoichet, a physician in Victoria BC who claims that he is willing assist the suicides of his patients, if the law were changed or struck down by the court.



The BCCLA is attempting to overturn the Criminal code provisions prohibiting euthanasia and assisted suicide by asserting that the law is unconstitutional. The BCCLA hope to bring the case to the Supreme Court with the expectation that the Court will reverse the Rodriguez decision (1993) and strike down the assisted suicide act. They also want to strike down the provisions in the Criminal Code

that prohibit euthanasia.

EPC challenges BCCLA's assertion that the Assisted Suicide Act is unconstitutional. The very basis of their case is incorrect, for several reasons. The Criminal Code does not infringe individual autonomy but rather it protects vulnerable persons.

ELDER ABUSE: A GROWING BEAT



Canada has an interest in protecting its citizens from having death or harm imposed on them. The government must protect elders and people with disabilities from abuse and undue influence.

The BCCLA states in its "Notice of Claim" that the provisions in the Criminal Code that are unconstitutional, in relation to this case are: Sections 14, 21, 22, 222, and 241.

Section 14 states:

no person is entitled to consent to have death inflicted on him, and such consent does not affect the criminal responsibility of any person that inflicts on the person who consents.

Section 21 states:

(1) Every one is a party to an offence who: (a) actually commits it; (b) does or omits to do anything for the purpose of aiding any person to commit it; (c) abets any person in committing it.
(2) Renders two or more persons carry out an unlawful intention to carry out an unlawful purpose and to assist each other to carrying out the common purpose, commits an offence, each of them who knew or ought to have known that the offence would be a probable consequence.

Section 22 states:

(1) and (2) Renders a person who counsels another person to be party to an offence, where the person counselled is thereafter a party to an offence, also a party to the offence.

Section 222 is the homicide provision of the Criminal Code. Euthanasia is defined as a form of homicide.

Section 241 is the assisted suicide provision in the Criminal Code. Section 241 prohibits, aiding, abetting (encouraging) and counselling suicide.

The BCCLA asserts that the Criminal Code prevents people from having control over personal choices. In fact the Criminal Code does not prevent personal choice, but rather it prevents another person from causing death or being involved with causing the death of another person. The Criminal Code prohibits a person from aiding, encouraging or counselling a person to commit suicide and it prohibits a person from directly and intentionally causing the death of another person.

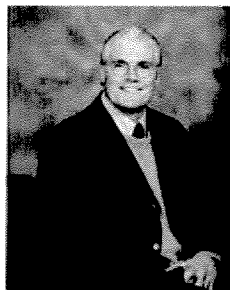
The BCCLA also falsely asserts that withholding medical treatment or care that may result in the death of the person is that same as actively causing the death of a person. The courts have correctly recognized that there is a difference between causing a person's death and letting them die.

EPC holds that the Criminal Code, when effectively applied, is designed to protect vulnerable people from another person influencing, encouraging, counselling or physically assisting the

suicide of a person or directly causing that persons death. The Criminal Code protects people with disabilities from others who may consider their lives as not worth living and it protects seniors and other vulnerable people from the ultimate form of elder abuse, an intended death.

Disability activist, Mark Pickup, from Alberta stated to EPC:

"the newspaper described Kay Carter (89) as a Right to die proponent. She developed spinal stenosis in 2008 which causes "pain, lack of coordination, numbness, loss of bladder and bowel control and paralysis." That was enough reason to overturn laws against assisted suicide? I disagree. I've had those very same symptoms (and many others) throughout my 27 year journey with multiple sclerosis. I want our laws prohibiting assisted suicide to stay in effect and enforced, in case I despair and happen to meet someone like Kay's daughter and son-in-law who agrees with killing me."



Based on negative social attitudes toward people with disabilities and the growing awareness of the social scourge of elder abuse, society must not remove the protections in law that exist to prevent assisted suicide or euthanasia, but rather society needs to uphold and maintain these laws while enhancing the care and protection that is provided for people with disabilities, people with chronic conditions, the frail elderly and those who are nearing death.

Posted by Alex Schadenberg at [11:22 AM](#) [0 comments](#)

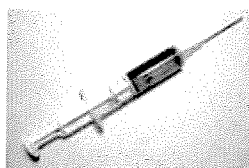
Labels: [Assisted Suicide](#), [BC Civil Liberties Association](#), [Canada](#), [Dignitas clinic](#), [euthanasia](#), [Euthanasia Prevention Coalition](#), [Mark Pickup](#)

Friday, April 22, 2011

Vermont Assisted Suicide bad idea, bad bill

Grace Weber [wrote a good article](#) about the bill to legalize assisted suicide in Vermont that was published in the Burlington Free Press yesterday. Weber comments about the language of the bill and the outcome of legalizing assisted suicide. If there is nothing wrong with assisted suicide, then why do they need to lie about it.

[The article](#) is republished in full.



When we discard the euphemism "death with dignity" and replace it with plain English, we see that the Vermont Legislature proposes to endorse and enable suicide for qualifying citizens. The idea is bad, and the bill is bad.

Certainly, terminal illness is a wrenching problem. But there are others. Loss of good name, heartbreak and financial ruin are among the other reasons for which competent persons commit suicide. Does anyone doubt that mental anguish can be as great as physical pain?

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INTERVENOR

AFFIDAVIT

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