

November is Palliative and Hospice Care Awareness Month

We celebrate those who care for the disabled and the sick

We educate ourselves about Physician Assisted Suicide

What's wrong with giving the terminally ill the choice to end their lives?

- Assisted suicide laws increase overall suicide rates, creates social contagion, and is glamorized by Compassion and Choices, a pro-suicide group
- Providing some people with suicide prevention and some with suicide help makes no sense
- Insurance companies are denying lifesaving treatment but will provide cheaper lethal drugs
- 25% of patients asking for PAS suffer from depression but do not get mental health support
- Fear of pain is not the main reason patients request PAS ... top 5 reasons are loss of autonomy, can't engage in enjoyable activities, burden on family, loss of dignity and loss of functions
- Six month diagnosis for death is unreliable
- Medical care is different for the able bodied and the disabled
- "Safeguards" become "barriers to be eliminated," states want to get rid of waiting periods, residency requirements, requirements to be able to self-administer (becomes euthanasia), and expand the definition of terminal illness (such as in Canada)
- There is no requirement for supervision, no follow-up. The dying process is excruciating and can take hours, or not work at all, and there are no safeguards to prevent coercion
- Assisted suicide is not compassionate ... it's just suicide.

**If people you know appear to be considering suicide, please
let them know of the [National Suicide Prevention Hotline](https://www.suicidepreventionhotline.org)**

1-800-273-8255

**Resources: Not Dead Yet, Patients Rights Action Fund, Disability Rights
Education and Defense Fund, and Stop Assisted Suicide Illinois**