

## Fatally Flawed:

### Disability Discrimination

“Loss of dignity” is one of the [top reasons](#)<sup>1</sup> people choose physician-assisted suicide (PAS). Proponents of PAS seem to measure dignity by either how much someone “contributes” to society or by whether someone *feels* dignified. But if all humans are born with inherent dignity, how does one lose that dignity? Indeed, PAS devalues vulnerable groups such as children, the elderly, and those with disabilities, all of whom could be considered “undignified,” by this definition.

We all share in dignity by the fact that we are human. In straying from this truth, we put a price tag on others. By saying that someone has lost her dignity, we really are saying that she has lost her humanity, her intrinsic value. Assisted suicide begs the question, is life only valuable up to a point? And if so, where do we draw the line?

### **Assisted suicide violates the Americans with Disabilities Act (ADA) and “safeguards” fail to protect those with physical or mental disabilities**

In 1990, President George H.W. Bush signed the Americans with Disabilities Act (ADA) to advance equality for people with disabilities in the United States. Though the ADA has made great progress for the country’s disabled community, the legalization of assisted suicide raises issues at odds with the law’s initial intent.

[Every national disability organization](#)<sup>2</sup> opposes the legalization of PAS, because all who qualify are considered disabled according to the ADA’s [definition of disability](#)<sup>3</sup>. This disproportionately targets the disabled, a textbook case of discrimination. In fact, documented [examples](#)<sup>4</sup> exist of assisted suicide for [treatable diseases](#)<sup>5</sup> such as diabetes, arthritis, and anorexia. Supposed guardrails like psychiatric referrals simply don’t work - Oregon, for example, [issues](#)<sup>6</sup> almost no psychiatric referrals year after year, despite [overwhelming evidence](#)<sup>7</sup> that chronic disease causes heightened rates of [mental health conditions](#)<sup>8</sup>.

### **Bias in Big Healthcare**

Individuals with disabilities require frequent interactions with the healthcare system, which increases the likelihood they can be coerced into taking their own lives simply by exposure to this discriminatory system. After all, a 2021 [survey](#)<sup>9</sup> showed that 82% of healthcare professionals believed that people with severe disabilities already have a lower quality of life than those without disabilities. This preconceived bias within the medical community causes many people with disabilities to distrust the health care system, as they feel devalued before they even enter the examination room. The push for legalized PAS boils down to a fear of disability.

**CASE STUDY:** A [report by Eat Breathe Thrive](#)<sup>10</sup> found that at least sixty people internationally have been killed by assisted suicide and euthanasia due to their eating disorders. 89.8% of anorexia patients that use treatment focusing on weight restoration recover – it is not a terminal disease.

**CASE STUDY:** In 2020, [Michael Hickson](#)<sup>11</sup>, a quadriplegic African American man from Austin, was diagnosed with Covid-19. Due to his status as a quadriplegic, his physicians deemed his life to be one of “low quality,” even though he had a loving wife and children, and they refused to offer him lifesaving treatment. Michael died after not receiving the necessary treatment he needed, against the wishes of his family.

### **It Is Cheaper to Kill You than to Care for You**

In 2017, the Canadian Medical Association Journal [found](#)<sup>12</sup> that Medical Assistance in Dying (MAiD) in Canada could save the Canadian government anywhere from \$35.7 million to \$138.8 million in annual health care spending. However, this is not the first time in history that cost-saving considerations have been used to justify assisted suicide. For example, the Nazis promoted euthanasia under the guise of similar economic benefits using their T4 program which took the lives of 250,000 people.

Further, public and private providers already have perverse incentives to maximize savings through denial of care to individuals with costly conditions or illnesses; there have been various [examples](#)<sup>13</sup> of this. Medicaid alone spent \$23 billion on health care for people with disabilities in 2018 and estimates show that caring for family members with disabilities can exceed \$20,000 annually. People with disabilities should not face the consequences of physician-assisted suicide as a result of our broken healthcare system and rising prices.

**CASE STUDY:** [Stephanie Packer](#)<sup>14</sup>, a thirty-four-year-old woman from California, was diagnosed with scleroderma in 2016 and was given three years to live. Determined to beat the disease, for her own sake and that of her four children, Stephanie requested a new treatment method hoping that it would improve her condition. To her surprise, her insurance provider denied her request and instead offered her assisted suicide at the cost of a \$1.20 copay.

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<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EVALUATIONRESEARCH/DEATHWITHDIGNITYACT/Documents/year26.pdf>

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<sup>2</sup> <https://notdeadyet.org/disability-groups-opposed-to-assisted-suicide-laws/>

<sup>3</sup> <https://www.ada.gov/law-and-regs/ada/#:~:text=Sec.%2012102.%20Definition%20of%20disability>

<sup>4</sup>

<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EVALUATIONRESEARCH/DEATHWITHDIGNITYACT/Documents/year24.pdf>

<sup>5</sup> <https://www.washingtontimes.com/news/2018/jan/11/diabetics-eligible-physician-assisted-suicide-oreg/>

<sup>6</sup>

<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EVALUATIONRESEARCH/DEATHWITHDIGNITYACT/Documents/year26.pdf>

<sup>7</sup> [https://www.nimh.nih.gov/health/publications/chronic-illness-mental-health#:~:text=People%20who%20have%20a%20chronic%20disease%20are,disease%20\(such%20as%20Parkinson's%20disease%20or%20stroke\)](https://www.nimh.nih.gov/health/publications/chronic-illness-mental-health#:~:text=People%20who%20have%20a%20chronic%20disease%20are,disease%20(such%20as%20Parkinson's%20disease%20or%20stroke))

<sup>8</sup> <https://www.speechpathology.com/ask-the-experts/what-connection-between-chronic-health-20572#:~:text=Answer,depressive%20disorder%2C%20which%20is%20significant.>

<sup>9</sup>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8722582/#:~:text=Our%20survey%20of%20714%20practicing,of%20life%20than%20nondisabled%20people.>

<sup>10</sup>

<https://static1.squarespace.com/static/58e4b708f5e2312cc949b8b4/t/66e828dde88bf757b8f0acc3/1726490860329/Assisted+Suicide+in+Eating+Disorders+Report+-+US+Version.pdf>

<sup>11</sup> <https://www.npr.org/2020/07/31/896882268/one-mans-covid-19-death-raises-the-worst-fears-of-many-people-with-disabilities>

<sup>12</sup>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5250515/#:~:text=RESULTS%3A, costs%20associated%20with%20its%20implementation>

<sup>13</sup> <https://www.foxnews.com/story/oregon-offers-terminal-patients-doctor-assisted-suicide-instead-of-medical-care>

<sup>14</sup> <https://www.washingtontimes.com/news/2016/oct/20/assisted-suicide-law-prompts-insurance-company-den/>