

## Most Canadians support assisted suicide, but under which circumstances reveal much deeper divides

*Experience with palliative care a key driver of opinion; also differences in perspective along religious lines*

**December 16, 2014** – Canadians express moderate to strong support for changes in legislation that would allow physicians to help patients who want to commit suicide, but the specific circumstances that might justify this course of action suggest deep divisions in public opinion.

Canadians' views on doctor-assisted suicide vary significantly based on the perceptions of recent experiences with loved ones receiving end-of-life care.

Those reporting a negative experience with palliative and hospice based care are significantly more likely to support physician-assisted suicide.

Religious adherence and participation also drives opinion on the issue. These findings come from a new in-depth, independent national survey carried out by the Angus Reid Institute.

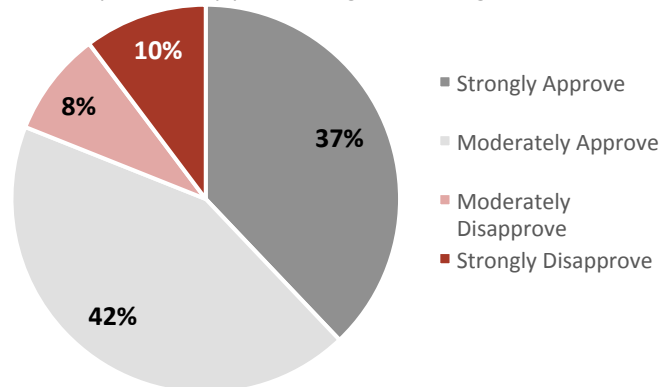
As the issue goes before both the Supreme Court of Canada, one might argue that the strongest supporters of physician-assisted suicide – those who very much view it as “social progress that will do more good than harm” have commanded much of the public voice in the deliberation of this serious issue.

However, the crux of the debate is likely to revolve around the highly contentious questions surrounding the specific circumstances under which the law should and should not permit doctors to assist in the termination of their patients' lives.

The ARI findings show those who oppose this change also take the traditional position on the sanctity of life, attend religious services and believe in a life after death. They see physician-assisted suicide as a “moral” issue. They are also the most likely to report positive experiences with end-of-life care.

On the other hand, those who most enthusiastically endorse this profound change in legislation regarding

Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?



### **METHODOLOGY:**

Online survey among 1504 randomly selected Canadian adults who are Angus Reid Forum panelists from November 25-28, 2014. A probability sample of this size carries a margin of error of +/- 2.5%, 19 times out of 20.

This survey was self-commissioned and paid for by ARI.

Detailed charts, tables and regional results are found at the end of this release.

### **MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

end of life are generally less likely to have an affiliation with any religion. Indeed, are the most likely to describe themselves as atheists. This group also holds very firm on the right to die across a range of scenarios, and embrace the debate as a sign of social progress.

In the middle is the largest group of Canadians who are open to the arguments in favour of a new overall approach in law, but who remain highly uneasy about specifics.

### Support for changing the law

Asked for their overall views on changing the criminal code to allow for physician-assisted suicide, Canadians fall into three broad opinion segments:

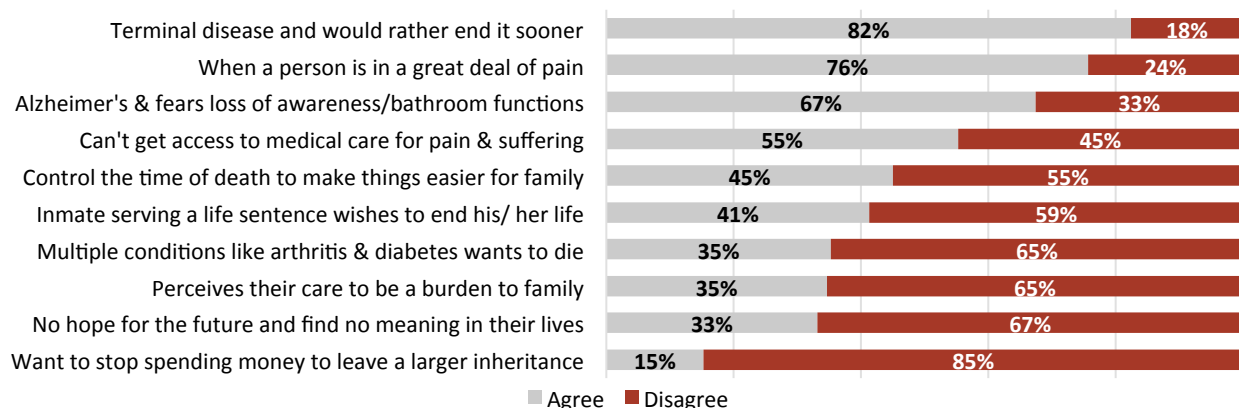
- Just over one-in-three Canadians (37%) voice strong overall approval
- A plurality of four-in-ten (42%) voice moderate approval
- And one-in-five (18%) disapprove either moderately (8%) or strongly (10%)

The overall survey findings show a fair degree of consistency across main socio-demographic groupings. Regionally, we see approval of physician-assisted suicide is somewhat stronger in Quebec and BC, and somewhat lower in Alberta. Older Canadians (those over 55) also tend to express more overall acceptance than those middle-aged and younger. Contrary to conventional wisdom, the results point to no important differences by relative affluence or formal educational attainment. Those with better education or more money are neither more nor less likely to support this proposed legislative change. (See detailed tables and charts at the end of this release for socio-demographic and other breakdowns.)

### But, under what circumstances?

As Canada now considers whether to change the laws governing what physicians can and cannot legally do to assist patient suicide, a critical crux of the debate and any eventual law making can be expected to revolve around the parameters of permissibility – under what circumstances would the law allow it? The ARI survey gauged Canadians' response to ten different possible scenarios where physician-assisted suicide might be advocated (and indeed has been used in some jurisdictions).

#### Should such assisted suicide be permitted in the following types of cases:



#### MEDIA CONTACT:

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

The results clearly outline the divergence among the main opinion groupings highlighted above.

- 1) The first group – the slightly more than a third (37%) of Canadians displaying strong support for the legalization of assisted suicide – believes the practice should be legally permissible in a wide range of circumstances.

This group expresses solid agreement for four of the ten scenarios assessed:

- In terminal cases, when the patient is in extreme pain
- In cases such as Alzheimer’s where there is risk of a significant loss of bodily function and mental control
- In cases where the afflicted can’t obtain access to good medical care
- Among those who wish to control the timing of their death to make it easier for their family

The first group is evenly split in support for physician-assisted suicide on three other scenarios:

- Prison inmates with life sentences who would prefer to end their lives
- Those with multiple chronic afflictions
- And those who fear they are a burden on their family

These scenarios as a justifiable basis for doctor-assisted suicide is rejected by the opinion groups.

- 2) Among the plurality (42%) of Canadians who expressed “moderate approval” for permitting physician-assisted suicide, a majority indicated agreement for four of the 10 scenarios:

- For those suffering a great deal of pain
- For patients facing diseases like Alzheimer’s that involve significant loss of control
- In cases involving a terminal prognosis of six months or less
- In cases where medical access is limited

This middle group’s support for these scenarios also translates into majority support among the Canadian public as a whole. But, they draw the line there.

Unlike the respondents in group one, these respondents generally disapprove of physician-assisted suicide for each of the other six scenarios assessed. The two groups are most divergent on the two scenarios related to family, i.e. being a burden and controlling timing to make things easier.

- 3) Among the opposed group – representing roughly one-in-five Canadians (18%) – the ARI survey finds general disapproval of physician-assisted suicide for all ten scenarios examined. We do see some acceptance among this group in the cases of definite terminal illness and extreme pain, but most still voice disagreement in these cases.

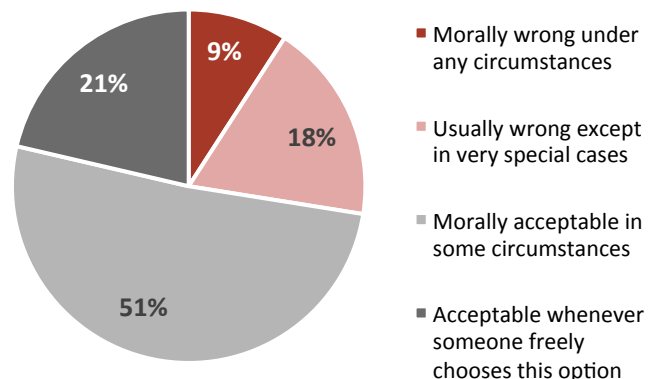
Further analysis shows the acceptance is driven by the half of this group who describe themselves as moderately opposed, while those strongly against hold firm for all scenarios examined.

## The moral dimension

The perceived moral acceptability of physician-assisted suicide aligns quite closely with the overall approval of changing the law in this direction. Asked to choose one of four characterizations, survey respondents dispersed as follows:

- One-in-ten (9%) view physician-assisted suicide as “morally wrong under any circumstances”. Another one-in-five (18%) opted for “usually wrong except in very special cases”. As would be expected, those earlier voicing disapproval overall and in the various specific circumstances overwhelmingly opted for one of these “morally wrong” characterizations.
- Fully half (51%) took the position that physician-assisted suicide is “morally acceptable in some circumstances”. This is where three-quarters of the moderate supporters placed themselves.
- The remaining one-in-five (21%) consider it “acceptable whenever someone freely chooses this option”. This latter is the position taken by fully half of the strongest supporters.

Which of the following best describes your overall view of the morality of physician assisted suicide?



## Faith-based component

This Angus Reid Institute survey included some measures of religiosity and the results show a significant faith-based aspect underlying Canadians’ views of physician-assisted suicide.

In terms of religious affiliation:

- Support for physician-assisted suicide is strongest among those who self-identify as atheist (60% voiced strong approval versus the 37% observed among Canadians as a whole). It is also well above the average among those who consider themselves agnostic (47%).
- For those who do identify with a faith, attendance at religious services is an important factor relating to views on physician-assisted suicide. For example, among Roman Catholics and mainline Protestants as a whole, views tend to reflect the overall public disposition on the “ballot question”. But taking religious attendance into account shows those who attend at least occasionally are more uneasy about physician-assisted suicide than their counterparts who

---

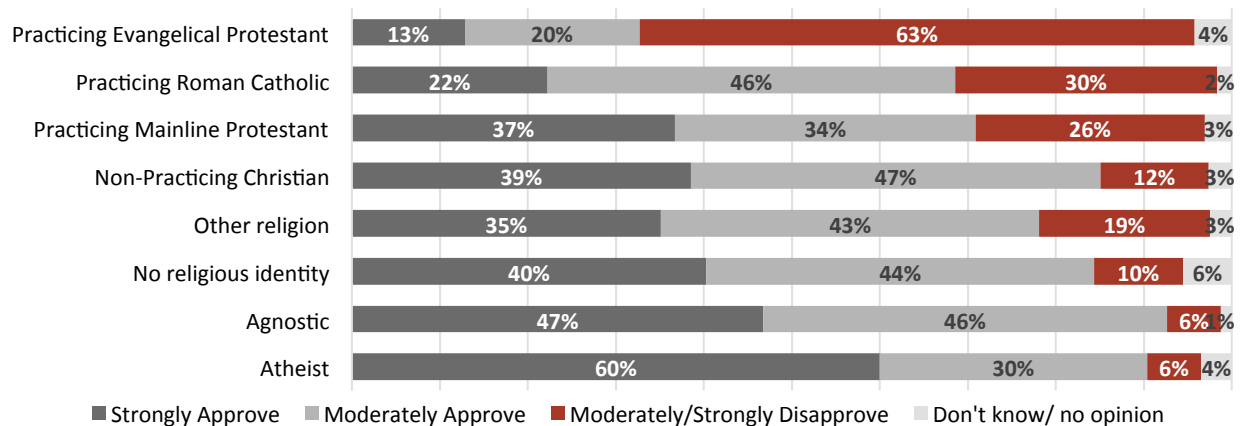
### MEDIA CONTACT:

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

identify with these faiths but do not attend services – indeed, levels of opposition are twice as high among those who attend religious services.

- Disapproval or at least uneasiness with physician-assisted suicide is most pronounced among Canadians belonging to an evangelical Protestant denomination: fully 63% of Evangelicals who regularly attend church expressed disapproval compared to the 18% recorded among the whole population.

Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?



Belief in an “after life” also plays a role. This is, of course, highly correlated with people’s religious identification and attendance and is a tenet of religious belief for many, which helps explain what might otherwise seem somewhat counter-intuitive on the surface.

Those who do not believe there is life after death voice much stronger approval for assisting death while those who believe the departed may live on in some form are more reticent to hasten the departure (54% strongly approve versus only 29% respectively).

### Palliative care

What of the relationship between people’s experience with palliative care and views of physician-assisted suicide? The results of this ARI survey do highlight a definite connection.

Asked about their own personal experience, one-in-three Canadians surveyed indicated someone close to them had received professional palliative care in the past five years.

Further, asked if their loved one had received “end-of-life care that gave them comfort and dignity” – most of those with some recent experience said this had been the case “always” (27%) or at least “most of the time” (52%). But, one-in-five (20%) of those with a recent palliative experience said it did not provide the patient with comfort and dignity.

Not surprisingly, the palliative experience helps focus the mind on end-of-life issues: of the Canadians with some recent

experience (good or bad), fully two-thirds said they have given physician-assisted suicide a lot of thought compared to slightly less than half of those with no recent experience of palliative care.

And the nature of that experience displays a fairly strong relationship to support for physician-assisted suicide.

As previously mentioned, almost four-in-ten Canadians (37%) indicate strong approval for legislative change. This level of strong support is 33 per cent among those with no recent palliative care experience, moving up to 41 per cent of those with an experience that they consider achieved comfort and dignity for the patient, and jumping to almost two-thirds (63%) among those with a more negative palliative care experience – fully double the level recorded among those with no recent experience.

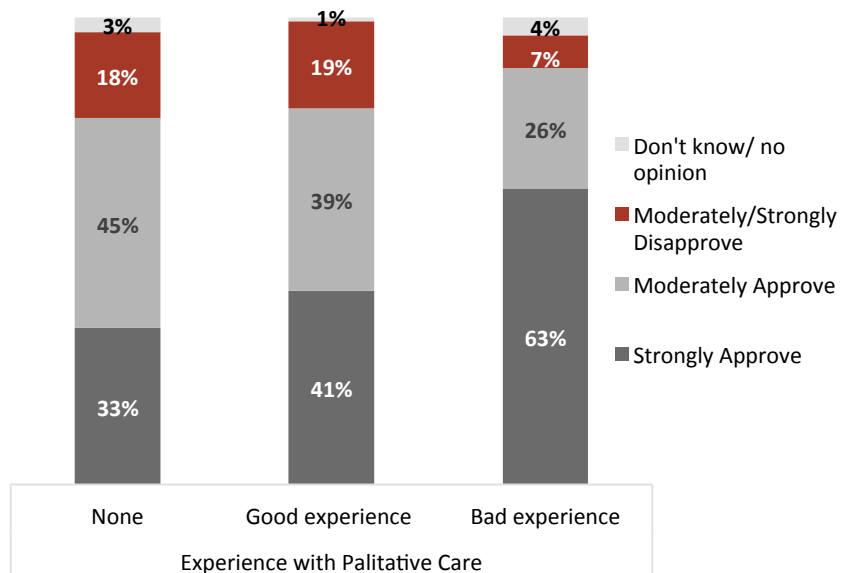
### Other features of the public opinion landscape

Other overall measures included in the survey underline the extent to which the Canadian public is supportive of having this debate on the merits of physician-assisted suicide.

In brief, the survey also found: (detailed tabular results are appended)

- The issue is definitely on Canadians’ radar: fully half (53%) say they have been giving it a lot or a fair amount of thought, and this figure is much higher (80%) among those most strongly supportive.

Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?



### MEDIA CONTACT:

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

# ANGUS REID INSTITUTE

Public Interest Research

For Immediate Release  
Canadian Public Opinion Poll

---

Page 7 of 17

- Canadians want the Supreme Court of Canada to give greatest weight to “the desire of people to end their lives at the place and timing of their choice” as opposed to “the risk that vulnerable populations in Canada such as the elderly, the sick and those requiring care will feel pressure” (71% versus 29%).
- The debate itself is seen by most as a sign of social progress not weakness (77% versus 23%).
- Most Canadians believe legalizing physician-assisted suicide would do more good than harm (74% versus 26% who take the opposite view).

*The **Angus Reid Institute (ARI)** was founded in October 2014 by pollster and sociologist, Dr. Angus Reid. ARI is a national, not-for-profit, non-partisan public opinion research organization established to advance education by commissioning, conducting and disseminating to the public accessible and impartial statistical data, research and policy analysis on economics, political science, philanthropy, public administration, domestic and international affairs and other socio-economic issues of importance to Canada and its world.*

---

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?								
(unweighted totals)	Total (1504)	Region						
		BC (252)	AB (250)	SK (100)	MB (101)	ON (400)	PQ (301)	ATL (100)
Strongly Approve	37%	42%	32%	38%	33%	34%	39%	38%
Moderately Approve	42%	42%	37%	38%	40%	42%	44%	40%
Moderately/Strongly Disapprove	18%	14%	26%	20%	23%	20%	14%	19%
Don't know/ no opinion	3%	2%	5%	4%	3%	4%	2%	3%

Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?						
(weighted totals)	Total (1504)	Gender		Age		
		Men (735)	Women (769)	18 – 34 (430)	35 – 54 (563)	55+ (511)
Strongly Approve	37%	40%	34%	31%	36%	43%
Moderately Approve	42%	40%	43%	46%	41%	39%
Moderately/Strongly Disapprove	18%	17%	20%	18%	20%	17%
Don't know/ no opinion	3%	3%	3%	5%	3%	2%



**Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?**

(weighted totals)	Total (1504)	Religion							
		Practicing Evangelical (92)	Practicing Roman Catholic (148)	Practicing Mainline Protestant (83)	Non-Practicing Christian (445)	Other religious identity (198)	No religion (314)	Agnostic (75)	Atheist (117)
Strongly Approve	37%	13%	22%	37%	39%	35%	40%	47%	60%
Moderately Approve	42%	20%	46%	34%	47%	43%	44%	46%	30%
Moderately /Strongly Disapprove	18%	63%	30%	26%	12%	19%	10%	6%	6%
Don't know/ no opinion	3%	4%	2%	3%	3%	3%	6%	1%	4%

**Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?**

(weighted totals)	Total (1504)	Belief in life after death		
		Yes (636)	No (340)	Uncertain (528)
Strongly Approve	37%	29%	54%	34%
Moderately Approve	42%	40%	32%	50%
Moderately/Strongly Disapprove	18%	27%	11%	12%
Don't know/ no opinion	3%	3%	3%	4%

**Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?**

(weighted totals)	Total (1504)	Experience with Palliative Care		
		None (928)	Good Experience (390)	Bad Experience (103)
Strongly Approve	37%	33%	41%	63%
Moderately Approve	42%	45%	39%	26%
Moderately/Strongly Disapprove	18%	18%	19%	7%
Don't know/ no opinion	3%	3%	1%	4%

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

<b>Should such assisted suicide be permitted in the following types of cases: Summary of Agree</b>					
(weighted totals)	Total (1504)	Approve/Disapprove of changing the criminal code of Canada			
		Strongly Approve (551)	Moderately Approve (627)	Moderately Disapprove (127)	Strongly Disapprove (149)
When a person has a terminal disease with a prognosis of, say, six months maximum and would rather end it sooner	82%	96%	92%	57%	14%
When a person is in a great deal of pain	76%	89%	83%	55%	18%
When a person has a disease like Alzheimer's and fears a loss of self-awareness and/or bathroom functions	67%	87%	68%	43%	13%
When a person can't get access to medical care to treat their pain and suffering	55%	69%	57%	41%	9%
When a person wants to control the exact time of their death to make things easier for their family	45%	60%	46%	26%	3%
When an inmate serving a life sentence in jail wishes to end his/her life	41%	50%	41%	34%	15%
When a person perceives their care to be a burden to their family	35%	51%	31%	16%	4%
When a person with multiple conditions like arthritis and diabetes feels overwhelmed and wants to die	35%	49%	35%	16%	3%
When a person has no hope for the future and finds no meaning in their lives	33%	43%	33%	24%	4%
When a person wants to stop spending their money in order to leave their family with a larger inheritance	15%	19%	13%	14%	6%

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

Should such assisted suicide be permitted in the following types of cases: Summary of Agree						
(weighted totals)	Total (1504)	Religion				
		Practicing Evangelical (92)	Practicing Roman Catholic (148)	Practicing Mainline Protestant (83)	Non- Practicing Christian (445)	Other religious identity (198)
When a person has a terminal disease with a prognosis of, say, six months maximum and would rather end it sooner	82%	42%	73%	81%	88%	79%
When a person is in a great deal of pain	76%	36%	77%	78%	76%	73%
When a person has a disease like Alzheimer's and fears a loss of self-awareness and/or bathroom functions	67%	36%	65%	69%	66%	61%
When a person can't get access to medical care to treat their pain and suffering	55%	26%	55%	59%	61%	55%
When a person wants to control the exact time of their death to make things easier for their family	45%	23%	34%	42%	41%	51%
When an inmate serving a life sentence in jail wishes to end his/her life	41%	23%	36%	41%	40%	37%
When a person perceives their care to be a burden to their family	35%	20%	29%	29%	37%	37%
When a person with multiple conditions like arthritis and diabetes feels overwhelmed and wants to die	35%	16%	31%	32%	33%	41%
When a person has no hope for the future and finds no meaning in their lives	33%	21%	30%	43%	29%	31%
When a person wants to stop spending their money in order to leave their family with a larger inheritance	15%	8%	9%	13%	10%	20%

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

Should such assisted suicide be permitted in the following types of cases: Summary of Agree				
(weighted totals)	Total (1504)	Religion		
		No religion (314)	Agnostic (75)	Atheist (117)
When a person has a terminal disease with a prognosis of, say, six months maximum and would rather end it sooner	82%	89%	95%	93%
When a person is in a great deal of pain	76%	83%	85%	85%
When a person has a disease like Alzheimer's and fears a loss of self-awareness and/or bathroom functions	67%	79%	77%	82%
When a person can't get access to medical care to treat their pain and suffering	55%	59%	48%	52%
When a person wants to control the exact time of their death to make things easier for their family	45%	54%	46%	68%
When an inmate serving a life sentence in jail wishes to end his/ her life	41%	48%	47%	55%
When a person perceives their care to be a burden to their family	35%	39%	25%	42%
When a person with multiple conditions like arthritis and diabetes feels overwhelmed and wants to die	35%	38%	36%	52%
When a person has no hope for the future and finds no meaning in their lives	33%	41%	34%	37%
When a person wants to stop spending their money in order to leave their family with a larger inheritance	15%	22%	17%	25%

Which of the following best describes your overall view of the morality of physician assisted suicide? Would you say it is:								
(weighted totals)	Total (1504)	Region						
		BC (252)	AB (250)	SK (100)	MB (101)	ON (400)	PQ (301)	ATL (100)
Morally wrong under any circumstances	9%	8%	15%	16%	14%	10%	3%	13%
Usually wrong except in very special cases	18%	16%	20%	22%	18%	20%	17%	18%
Morally acceptable in some circumstances	51%	56%	47%	48%	50%	51%	53%	46%
Acceptable whenever someone freely chooses this option	21%	20%	19%	14%	17%	20%	27%	23%

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

**Which of the following best describes your overall view of the morality of physician assisted suicide? Would you say it is:**

(weighted totals)	Total (1504)	Gender		Age		
		Men (735)	Women (769)	18 – 34 (430)	35 – 54 (563)	55+ (511)
Morally wrong under any circumstances	9%	7%	11%	11%	9%	8%
Usually wrong except in very special cases	18%	19%	18%	21%	18%	16%
Morally acceptable in some circumstances	51%	53%	50%	54%	51%	49%
Acceptable whenever someone freely chooses this option	21%	21%	21%	14%	22%	27%

**Which of the following best describes your overall view of the morality of physician assisted suicide? Would you say it is:**

(weighted totals)	Total (1504)	Approve/Disapprove of changing the criminal code of Canada			
		Strongly Approve (551)	Moderately Approve (627)	Moderately Disapprove (127)	Strongly Disapprove (149)
Morally wrong under any circumstances	9%	1%	2%	9%	70%
Usually wrong except in very special cases	18%	4%	18%	69%	22%
Morally acceptable in some circumstances	51%	49%	71%	22%	8%
Acceptable whenever someone freely chooses this option	21%	46%	9%	0	0

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

Do you approve or disapprove of proposals to change the criminal code of Canada to allow physicians to assist with the suicide of their patients by prescribing lethal drugs?									
(weighted totals)	Total (1504)	Religion							
		Practicing Evangelical (92)	Practicing Roman Catholic (148)	Practicing Mainline Protestant (83)	Non-Practicing Christian (445)	Other religious identity (198)	No religion (314)	Agnostic (75)	Atheist (117)
Morally wrong under any circumstances	9%	51%	15%	4%	4%	12%	3%	3%	1%
Usually wrong except in very special cases	18%	30%	18%	33%	18%	18%	15%	9%	12%
Morally acceptable in some circumstances	51%	12%	58%	41%	54%	50%	54%	69%	56%
Acceptable whenever someone freely chooses this option	21%	7%	9%	22%	24%	20%	27%	19%	31%

During the last five years has anyone close to you, a friend or family member, received professional end of life care in a palliative care ward, hospice or at home?					
(weighted totals)	Total (1504)	Approve/Disapprove of changing the criminal code of Canada			
		Strongly Approve (551)	Moderately Approve (627)	Moderately Disapprove (127)	Strongly Disapprove (149)
Yes	33%	41%	28%	28%	30%
No	62%	56%	67%	57%	66%
Prefer not to say	6%	3%	5%	15%	4%

Overall did you feel that your friends and/or family received end of life care that gave them comfort and dignity?	
	Total (496)
Always	27%
Most of the time	52%
No, not for the most part	17%
Not at all	3%

## First, how much thought have you given to the issue of physician assisted suicide?

(weighted totals)	Total (1504)	Experience with Palliative Care		
		None (928)	Good Experience (390)	Bad Experience (103)
A great deal of thought	20%	16%	27%	35%
A fair amount	33%	30%	40%	37%
Some thought	32%	35%	28%	19%
Not much	10%	13%	4%	4%
No thought at all	5%	6%	2%	4%

## First, how much thought have you given to the issue of physician assisted suicide?

(unweighted totals)	Total (1504)	Region						
		BC (252)	AB (250)	SK (100)	MB (101)	ON (400)	PQ (301)	ATL (100)
A great deal of thought	20%	24%	21%	21%	22%	18%	21%	22%
A fair amount	33%	35%	27%	27%	30%	29%	42%	34%
Some thought	32%	28%	35%	31%	33%	37%	25%	28%
Not much	10%	9%	11%	17%	12%	12%	7%	12%
No thought at all	5%	4%	6%	4%	3%	5%	6%	4%

## First, how much thought have you given to the issue of physician assisted suicide?

(weighted totals)	Total (1504)	Approve/Disapprove of changing the criminal code of Canada			
		Strongly Approve (551)	Moderately Approve (627)	Moderately Disapprove (127)	Strongly Disapprove (149)
A great deal of thought	20%	39%	6%	12%	24%
A fair amount	33%	41%	33%	16%	25%
Some thought	32%	16%	44%	37%	28%
Not much	10%	4%	13%	21%	12%
No thought at all	5%	1%	3%	14%	10%

### MEDIA CONTACT:

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl

Overall which of the following two arguments do you feel the Court should give greatest weight to in reaching its decision:								
(unweighted totals)	Total (1504)	Region						
		BC (252)	AB (250)	SK (100)	MB (101)	ON (400)	PQ (301)	ATL (100)
The desire of people to end their lives at the place and timing of their choice, with drugs prescribed by physicians	71%	78%	69%	74%	73%	70%	71%	71%
The risk that vulnerable populations in Canada such as the elderly, the sick and those requiring care will feel pressure	29%	22%	31%	26%	27%	30%	29%	29%

Overall which of the following two arguments do you feel the Court should give greatest weight to in reaching its decision:					
(weighted totals)	Total (1504)	Approve/Disapprove of changing the criminal code of Canada			
		Strongly Approve (551)	Moderately Approve (627)	Moderately Disapprove (127)	Strongly Disapprove (149)
The desire of people to end their lives at the place and timing of their choice, with drugs prescribed by physicians	71%	93%	77%	27%	8%
The risk that vulnerable populations in Canada such as the elderly, the sick and those requiring care will feel pressure	29%	7%	23%	73%	92%

Some people see changing laws to permit legalized physician assisted suicide as a sign of social progress; others see this as a sign of social weakness. Which of these two positions is closest to your own?								
(unweighted totals)	Total (1504)	Region						
		BC (252)	AB (250)	SK (100)	MB (101)	ON (400)	PQ (301)	ATL (100)
Sign of social progress	77%	80%	67%	79%	74%	77%	81%	75%
Sign of social weakness	23%	20%	33%	21%	26%	23%	19%	25%

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl



Some people see changing laws to permit legalized physician assisted suicide as a sign of social progress; others see this as a sign of social weakness. Which of these two positions is closest to your own?

(weighted totals)	Total (1504)	Approve/Disapprove of changing the criminal code of Canada			
		Strongly Approve (551)	Moderately Approve (627)	Moderately Disapprove (127)	Strongly Disapprove (149)
Sign of social progress	77%	98%	89%	19%	4%
Sign of social weakness	23%	2%	11%	81%	96%

Suppose the Supreme Court rules to legalize physician assisted suicide and this becomes part of medical practice in Canada. In your opinion, in the longer term do you think this will ultimately:

(unweighted totals)	Total (1504)	Region						
		BC (252)	AB (250)	SK (100)	MB (101)	ON (400)	PQ (301)	ATL (100)
Do more harm than good	26%	21%	35%	29%	32%	27%	23%	27%
Do more good than harm	74%	79%	65%	71%	68%	73%	77%	73%

Suppose the Supreme Court rules to legalize physician assisted suicide and this becomes part of medical practice in Canada. In your opinion, in the longer term do you think this will ultimately:

(weighted totals)	Total (1504)	Approve/Disapprove of changing the criminal code of Canada			
		Strongly Approve (551)	Moderately Approve (627)	Moderately Disapprove (127)	Strongly Disapprove (149)
Do more harm than good	26%	4%	15%	85%	98%
Do more good than harm	74%	96%	85%	15%	2%

**MEDIA CONTACT:**

Shachi Kurl, Senior Vice President: 604.908.1693 [shachi.kurl@angusreid.org](mailto:shachi.kurl@angusreid.org) @shachikurl