

Visiting your MP is one of the most effective ways that you can make a difference in our campaign.

It is much more effective than writing to them because when you write, you will often get a response prepared by an MP's staff members and it may only be a party-held stock response. However, if you visit then the MP will have to think about the issue for some time; you can brief them on it more thoroughly than you could by email; and it's easier to get concrete commitments from them to take action.

This guide provides an overview of how to meet your MP, then some FAQs about assisted dying and the campaign for a compassionate assisted law.

This guide is intended to support you in preparation for the meeting, rather than being a set script to follow.

If you have any questions, you can email our Campaigns and Communications Manager Nathan Stilwell at nathan.stilwell@mydeath-mydecision.org.uk

ABOUT MEETING YOUR MP

[Find your local MP](#). This will include contact details and many MPs will have a website and social media account which may include more information about how to meet them.

Most MPs hold regular 'surgeries' (meetings with constituents) to discuss their concerns. Some MPs may hold open surgeries and some may require you to make an appointment. Therefore, it is best to contact your MP's office beforehand to check. Times and locations of surgeries can be found out either by phoning your MP's office or will be advertised locally, for example through your MP's website. You can also meet your MP in Parliament, but we recommend surgeries as easiest.

Preparing for the meeting

When meeting your MP, you should prepare what you are going to say thoroughly beforehand. Here are a few tips before you go:

- Go over the arguments you are going to make and make sure you can explain the problem clearly. You could practise with someone who is unfamiliar with the issue.
- Find out the start time and end time of your meeting. If in doubt, assume you may only have 10 minutes.
- Make sure that you know what you want your MP to do as a result of the meeting.
- Decide on a structure for how you want the meeting to run. It is best to start by introducing yourself and your relevant interests, then moving on to explain the issue, telling the MP what you want them to do about it, and asking for their thoughts on the matter. If more than one person is attending the meeting, decide beforehand who is going to speak and when.
- Right now, MDMD wants the government to launch an inquiry into assisted dying to consider evidence from all sides of the debate. Ask your local MP if they would support this, and if so ask if they can put it in writing to Sajid Javid MP (Health Secretary) and Jeremy Hunt MP (Chair of the Health and Social Care Committee).
- Be prepared to defend your position. Your MP may not agree with you, so it is best to prepare answers beforehand for any questions or counter-arguments they might make.
- Make sure you bring a notepad and pen with you.

At the meeting

- Dress smartly. For your MP to take your issue seriously, they need to take you seriously, so it is best to dress in smart or smart-casual clothes if possible.



- Make sure you are punctual. MPs are very busy people, so leave enough time to get to the meeting venue and to pass through security.
- Don't assume your MP will know anything about the issue at hand, even if you've sent over a briefing or briefed their staff in advance!
- Always be polite.
- If the meeting goes well, you could ask the MP if you can take a photo with them, you, and materials, to tweet showing their support, and/or get a quote from them to that effect.
- Don't forget to ask for copies of any actions they take on your issue and note down the contact details of any staffers for follow-ups and thank yous.

After the meeting

- You may wish to send a thank you message to your MP after the meeting – this can also serve as an opportunity to remind them of anything they committed to, and offer to put them in touch with us so we can work with them on those actions.
- Carry out any action points you agree with your MP in the meeting.
- Feed back on how it went. You can email our Campaigns and Communications Manager Nathan Stilwell at nathan.stilwell@mydeath-mydecision.org.uk.

SOME FAQs ABOUT ASSISTED DYING

Q: Will legalising assisted dying lead to a slippery slope?

A: We support the legalisation of assisted dying to afford freedom of choice only for those who have made a clear decision, free from coercion, to end their lives and who are terminally ill and/or incurably and unbearably suffering. We support strict legal safeguards to ensure that these conditions are met. International evidence suggests that this is possible without leading to a slippery slope.

Q: What do disability and medical charities think?

A: Most disability and medical charities are either neutral or against assisted dying. But most people with conditions such as Motor Neurone Disease and most disabled people support a change in the law, as do most doctors as evidenced by the recent British Medical Association poll on assisted dying.

Q: The public don't support assisted dying for incurably suffering people.

A: Actually, they do. But at any rate, we do not think that there is a strong moral case to limit assistance to terminally ill people alone, and we wish to see reform of the law that would be responsive to the needs of other people who are permanently and incurably suffering.

Q: What if people change their minds?

A: Adequate safeguards should be put in place to make sure that any decisions people make are clear and settled wishes, arrived at free from coercion. In Switzerland, this means having a psychological assessment, and also a waiting period to make sure a person's wishes don't change.

Q. What if there is a cure in the future?

A: People can make their own decision as to the likelihood of this happening weighed against their current suffering.

Q: Isn't it enough that people can go to Switzerland?

A: That prolongs the suffering of people who have already made the decision but where it takes time to arrange it; paradoxically, it means that some people end up going sooner than they otherwise might, before they become too sick to fly. Further, it is only available to those

that can afford it. It also means that people are denied the option to die at home or in familiar surroundings. Unfortunately many people feel they have to keep their plans secret, meaning that their family and friends have no chance for farewells.

Q: Isn't it happening by the back door already? The policy is not to prosecute, isn't that enough?

A: Where people are helping others to die they are doing this without safeguards and at the risk of a criminal charge. This is unacceptable. And if it's happening already, why not legislate and regulate the situation?

Q: In country X, assisted dying has led to involuntary deaths.

A: There is no evidence of this. Indeed, in places where assisted dying is legal, the evidence is overwhelmingly of success - people accessing assisted deaths free from coercion. The result is a reduction in suffering.

Q: Why do you think that disabled people should die?

A: We do not wish for anyone to die, unless they do and they are suffering incurably; that is a decision that only they can make. Legal assisted dying in no way degrades or devalues the lives of those who do not want it.

Q: Isn't palliative care enough? Shouldn't we work to make people happier rather than end it?

A: Improving palliative care is vital. But good palliative care and legal assisted dying are not mutually exclusive. Instead the best care that can be given is for people to be given the best palliative care available, and then be able to have the right to die should they find that that's not good enough.

Q: You will create murderers, causing doctors a conflict of interest.

A: Doctors will be following the wishes of their patients and using their medical skills to ensure that the procedure is dignified and humane. At any rate, it is likely that any legislative scheme would create a new group of medical professionals who would carry out assisted deaths and provide for healthcare workers to be able to conscientiously object from taking part in assisted dying.