

Go Deeper #2 – Euthanasia

Friday 30th August, 2018

1. Discovery

How do you work out right and wrong:

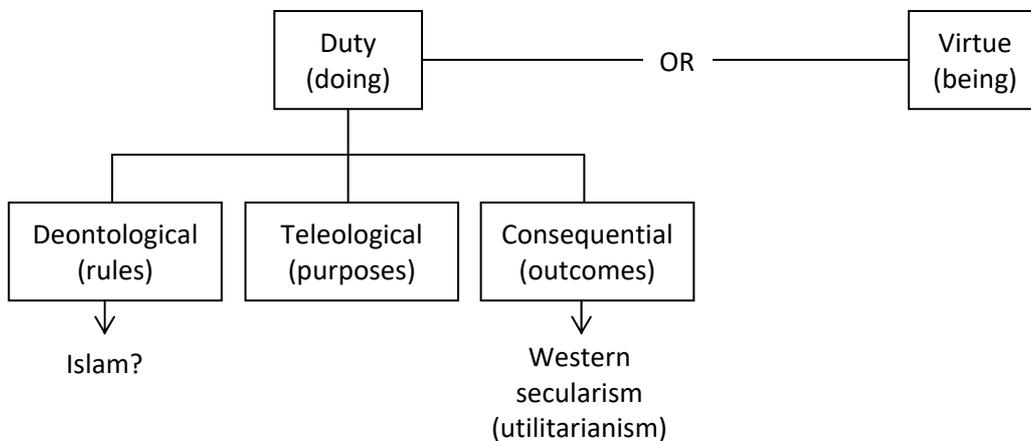
- i. in general?
- ii. In a specific case like euthanasia?

2. Ethical foundations

a. What is ethics?

Michael Hill, *The How and Why of Love*
Andrew Cameron, *Joined-up Life*

b. Different ethical models



Examples (which fits where?):

“Murder is just wrong. There can never be any justification for killing someone.”

“You really should leave your wife. You’ll never be happy if you stay with her.”

“Yes, he made a mistake. But he’s really a good person.”

“Sledging is a terrible blight on the game. It goes directly against the spirit of cricket.”

c. Worldview presuppositions

What is the fundamental unit of society?

What is the nature of reality?

What is the definition of “the good”?

James Sire, *The Universe Next Door*

d. Classical utilitarianism – the dominant secular Australian ethic

“The greatest good for the greatest number of people.”

The “good” is about maximising pleasure and minimising pain for the individual in fulfilment of his/her personal, autonomous choice.

e. Biblical ethics

Where do the following belong? What kind of ethic does the Bible promote?

“You shall not steal.” (Ex 20:15)

“Anyone who has been stealing must steal no longer, but must work, doing something useful with their own hands, that they may have something to share with those in need.” (Eph 4:28)

Paul, explaining why the Corinthians should give money to a famine appeal: “This service that you perform is not only supplying the needs of the Lord’s people but is also overflowing in many expressions of thanks to God.” (2 Cor 9:12)

“Just as he who called you is holy, so be holy in all you do.” (1 Pet 1:15)

“Let no debt remain outstanding, except the continuing debt to love one another, for whoever loves others has fulfilled the law.” (Rom 13:8)

f. A definition

“An action or trait of character is right if and only if it promotes (creates or maintains) mutual love relationships between (a) God and humans, and, (b) humans and humans.” (Michael Hill, p.131)

g. Making moral decisions (from Michael Hill, ch. 14)

- I. Start with the big picture.
- II. Draw out the principles and values involved.
- III. Find a place for rules.
- IV. Develop a Christian character.
- V. Educate your conscience.

3. Euthanasia in medicine and law

a. The case for euthanasia:

i. Definitions (from The Australian Human Rights Commission):

- (a) **Passive voluntary euthanasia** – when medical treatment is withdrawn or withheld from a patient, at the patient’s request, in order to end the patient’s life;
- (b) **Active voluntary euthanasia** – when medical intervention takes place, at the patient’s request, in order to end the patient’s life;
- (c) **Passive involuntary euthanasia** – when medical treatment is withdrawn or withheld from a patient, not at the request of the patient, in order to end the patient’s life;
- (d) **Active involuntary euthanasia** – when medical intervention takes place, not at the patient’s request, in order to end the patient’s life.

ii. Comments:

- The definitions are subversive.

The Medical Board of Australia and the Australian and New Zealand Society of Palliative Medicine (ANZSPM) state that **good medical practice** involves medical practitioners:

... Understanding that you do not have a duty to try to prolong life at all cost. However, you do have a duty to know when not to initiate and when to cease attempts at prolonging life, **while ensuring that your patients receive appropriate relief from distress.**

... Accepting that patients have the right to refuse medical treatment or to request the withdrawal of treatment already started.

- The proper term for voluntary active euthanasia is suicide.

iii. Justification for Legalisation of Euthanasia (AHRC).

- (a) Personal autonomy: freedom of choice in the face of intolerable suffering
- (b) Legislative legitimacy with 'transparent safeguards'.

b. The case against euthanasia

- i. The complexity of end-of-life care, and misunderstandings in public discussion
- ii. People's feeling that they are 'a burden', and its relationship to dignity and respect
- iii. The effects of suicide upon families, friends and healthcare workers
- iv. Difficulties in determining competence in decision-making
- v. The importance of frank and transparent end-of-life care discussions
- vi. The difficulty in predicting the remaining length of life
- vii. Symptoms are not necessarily painful, and eligibility extends to patients as young as 25 years
- viii. A change in society's values leading to normalisation of suicide
- ix. Laws, once on the statute books, are liable to be extended
- x. The relationship between doctor and patient is changed
- xi. Additional legislation is not necessary
- xii. The lack of general availability of palliative care services to all Australians

World Health Organisation statement:

"Euthanasia, that is the act of deliberately ending the life of a patient, even at the patient's own request or at the request of close relatives, is unethical. This does not prevent the physician from respecting the desire of a patient to allow the natural process of death to follow its course in the terminal phase of sickness."

4. Conclusions

a. What is right or wrong about euthanasia?

The Biblical view of:

- Life
- Illness and disease
- Medical care
- Death
- The meaning of life

b. How can we respond:

i. personally?

Paul David Tripp, <i>Lost in the Middle</i> Billy Graham, <i>Nearing Home</i>
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ii. among friends/colleagues?

iii. in the broader society?