

Euthanasia – A Controversial Contemporary Issue



THE FACTS

Euthanasia comes from two Greek words meaning “good death”. In contemporary debate it refers to the deliberate killing of a person supposedly for the benefit of that person. It is sometimes termed “mercy killing”. In most cases euthanasia is carried out because the person who dies asks for it (voluntary euthanasia), but there are cases of euthanasia where a person can't make such a request (involuntary euthanasia). A person who undergoes euthanasia is usually terminally ill, but there are other situations in which some people want euthanasia. Below you'll find some of the main arguments that are used in favour and against euthanasia. Some suggestions for further work for you then follow.

THE ARGUMENTS

“People in pain who are dying should be able to end their life. Why should they continue to suffer for a few more weeks or months in great pain?”

FOR EUTHANASIA: When our pets are suffering the vet will “put them to sleep”. It's not right that this option isn't available to our much-loved human relatives.

AGAINST EUTHANASIA: The distinction between the treatment of animals and human beings lies in the traditional teaching of the world religions about the sanctity of human life. Moreover, it is important to recognise that many agnostics and atheists also make a distinction between animal and human life. Whatever one's beliefs though there is almost no occasion where a dying person should have to die in great pain. Pain control is well-developed in the medical field and thanks to Cecily Saunders (see below) Britain leads the way in this branch of medicine. Even where the level of drug dose prescribed to control the pain shortens the patient's life this is not morally the same as deliberately killing the patient with a lethal injection.

IT source: Hospices are healthcare organisations that specialise in providing quality care and good pain control to dying people. Learn more about the hospice movement. The following web reference provides a good summary:

<http://www.nahf.org.uk/metadot/index.pl?id=17876&isa=Category&op=show>

The modern hospice movement in Britain can be traced back to a remarkable woman Dame Cecily Saunders. Type her name into an internet search engine and see what you can find out about her life and the work of hospices.

“Human beings should have the right to die when and how they want to”

FOR EUTHANASIA: Each person has the right to control his or her body and life and so should be able to determine at what time, in what way and by whose hand he or she will die. Human beings should be as free as possible. They are autonomous – they have the right to take and carry out decisions about themselves.

AGAINST EUTHANASIA: Death is a natural event that happens to everyone. Therefore it makes no sense to talk about a right to die. Euthanasia involves doctors and other medical staff. If euthanasia was legalised someone would have to carry it out. Someone's right to die, therefore becomes a doctor's duty to kill. Euthanasia is not like suicide. Suicide is a tragic, individual act and it is no longer criminalised in Britain. Euthanasia (or physician assisted suicide where someone's suicide is aided by a doctor) is different: it is not about a private act. It's about letting one person facilitate the death of another. That is a matter of very real public concern since it can lead to tremendous abuse, exploitation and erosion of care for the most vulnerable people among us.

IT source: The Voluntary Euthanasia Society has recently changed its name to Dignity in Dying. You can view its arguments in favour of legalised euthanasia here:

<http://www.dignityindying.org.uk/information/factsheets.asp?id=84>

Why do you think that a group such as this would change its name to Dignity in Dying?

Look at the medical opinion and public opinion sections of the www.carenotkilling.org.uk website. These sections list the positions of various medical bodies to euthanasia. They also provide opinion poll research on public and medical attitudes to euthanasia. You will notice a difference in attitudes. Doctors are much more opposed to euthanasia than the general public – why do you think this might be?

“Euthanasia is already happening in this country. We need to legalise it to provide a proper regulatory framework and protect vulnerable patients”

FOR EUTHANASIA: Vulnerable patients might be better protected if there were set procedures and rules that had to be followed for euthanasia than they are at present, where euthanasia is taking place on the quiet.

Indeed a patient who feared that they were under pressure to decide in favour of euthanasia would be able to gain help and support by initiating the formal procedures involved in regulated euthanasia - something that they cannot do now.

AGAINST EUTHANASIA: Cases of euthanasia in Britain are vastly exaggerated. In hospitals, doctors and nurses work in teams and it is virtually impossible to hasten someone’s death without other team members suspecting.

Legalising euthanasia would create a “slippery slope”. People who are ill and dependent can often feel worthless and an undue burden on those who love and care for them. If euthanasia is available, the sick person may pressure themselves into asking for euthanasia or be pressured by their family. Legalised euthanasia would also give doctors a legitimate reason to bring the subject up with patients. What starts off as a voluntary act in carefully controlled conditions will soon lead to many abuses of the system and the exploitation and killing of vulnerable people. There is evidence of this in the Netherlands where euthanasia has been tolerated since the 1970’s and was officially legalised in 2002. Recently, euthanasia has even been extended to new born infants with disabilities. So-called voluntary euthanasia has become involuntary euthanasia.

IT source: Visit <http://www.internationaltaskforce.org/holland.htm>

for a selection of articles that look at the Dutch euthanasia experience. Have the “strict rules” for voluntary euthanasia been followed? Visit the British Medical Journal article that describes the more than 1000 involuntary euthanasia deaths in the Netherlands each year

http://www.bmj.com/cgi/content/full/308/6940/1346?ijkey=4dd8811ec56a986144c7e12dc2258db9baf3621e&keytype=tf_ipsecsha



“I’m not in favour of actively killing anyone, but when someone is close to death we shouldn’t prolong the dying process by subjecting that person to lots of useless or burdensome treatment. They should be allowed to die”

FOR EUTHANASIA: Passive euthanasia is the withholding of life-sustaining treatment and/or conditions from a patient. This contrasts with active euthanasia where a deliberate intervention is made to end the life of the patient.

AGAINST EUTHANASIA: The moral status of passive versus active euthanasia is the same. The intention is to bring about the death of the individual concerned. In any case, the withholding of life-sustaining treatment or conditions can be viewed as a deliberate act and therefore the distinction between passive and active euthanasia disappears.

This is not to say that the process of dying should be prolonged by subjecting a person who is close to death to burdensome or useless medical treatment. Doctors are not obliged to continue with burdensome or useless treatment. They can stop or refuse to start such treatment even if they foresee that death will be hastened as long as their intention is not to cause death.

IT source: British law has been weakened in recent years, allowing passive euthanasia in some cases due to the Tony Bland legal decision made by top judges. You can find out more about this decision by typing Tony Bland into any search engine. Tony Bland’s story is a hard case. Do you think that hard cases such as this are a good reason to change the law affecting everyone?

The following document from Parliamentarians has a good section on the distinction between passive and active euthanasia. It is also a good reference source for all aspects of euthanasia. <http://www.publications.parliament.uk/pa/ld200405/ldselect/ldasdy/86/86i.pdf>

“We allow abortion in the case of disability. Surely it’s compassionate to allow euthanasia for disabled children and adults”

FOR EUTHANASIA: Many people with disabilities suffer badly. They may be in constant pain or lead very limited lives. Society should not force them to stay alive. If they want to die, then surely that is a decision for them?

AGAINST EUTHANASIA: Society already discriminates against people with disabilities. To legalise euthanasia will put disabled people at risk of being killed. It would divert efforts from the positive efforts to encourage people with disabilities to live independently and reduce efforts to cure diseases. We should expect our doctors to treat illness, disease and disabling conditions – to cure not to kill.

IT source: People with disabilities are increasingly finding their voice and opposing euthanasia for the disabled as an insidious form of discrimination against them. The following two web addresses give a flavour of the debate in the Guardian newspaper: <http://www.guardian.co.uk/commentisfree/2006/nov/17/comment.society> and <http://www.guardian.co.uk/commentisfree/2006/nov/24/comment.mainsection>

Baroness Jane Campbell the woman arguing for the choice of life for disabled people was born with spinal muscular atrophy, a so-called "terminal" condition. She cannot lift her head from the pillow unaided and she needs a ventilator to help her breathe at night. She uses a powered wheelchair and has a computer on which she types with one finger. Yet she has a high-powered and fulfilling job as the head of a major national organisation. She is the convenor of a group known as Not Dead Yet, see http://www.livingwithdignity.info/ndy_home.html There is also an unhappy history of euthanasia of people with disabilities see: <http://www.historyplace.com/worldwar2/holocaust/h-euthanasia.htm>

“Keeping people alive for a few more weeks at the end of their lives costs a lot of health service money. This could be better spent elsewhere in the health service.”

FOR EUTHANASIA: The last few months of a patient's life are often the most expensive in terms of medical and other care. Shortening this period through euthanasia is a way of relieving pressure on scarce medical resources, or family finances. Lethal medication for euthanasia costs less than £50, which is much cheaper than continuing treatment for many medical conditions.

AGAINST EUTHANASIA: Cost should never be a reason for ending a person's life. If euthanasia ever became available it would inevitably undermine the proper financing of health services for the elderly and disabled. Expensive and complicated operations might not be appropriate for an elderly person in the final stages of life, but providing a patient with food, basic personal care and controlling pain are essential and do not in any case cost huge sums.

IT source: Cost considerations are rarely, if ever mentioned as a reason for euthanasia. This may be because cost was certainly a factor in the Nazi euthanasia programme. See this article from the American Journal of Physicians and Surgeons:
<http://www.jpands.org/hacienda/article21.html>

However today in Britain, there is evidence that older people are already receiving less favourable medical treatment than younger people:
<http://www.telegraph.co.uk/news/main.jhtml;jsessionid=Zl4oRJKVSO4DZQFIQMGCFFWAVCBQUIVo?xml=/news/2007/02/14/nold14.xml>

Ideas for further work:

- 1 Hold a class debate on the motion that “This house believes that euthanasia should be legalised”. Arrange a number of speakers for and against the motion and allow the rest of the class to ask questions of the speakers ending with a class vote. You could also consider taking a vote before the debate to see if the debate has changed anyone's mind.
- 2 A bill has been presented before Parliament to legalise euthanasia. Write a letter to your MP either supporting or opposing the proposed new law.
- 3 Arrange to pay a visit to your local hospice or arrange a fundraising event to support the hospice. All hospices rely on donations to fund their work.
- 4 Arrange for your teacher to invite a speaker to come to school from one of the organisation's listed in the teacher's pack.
- 5 Write an essay on one of the following topics:
 - The life of Dame Cecily Saunders – Founder of the modern hospice movement
 - The history of the Nazi euthanasia movement
 - Are people with disabilities discriminated against by the medical profession?
- 6 Consider the role that the media play in affecting public opinion on euthanasia. Work through the separate worksheet on this issue included in your pack or download it from www.righttolifetrust.org.uk/education

