

Rights of the Terminally Ill (Euthanasia Laws Repeal) Bill, 2008

Submission

1.0 Definition.

1.1 We define euthanasia as the intentional killing of a person to relieve their suffering. It is not the withdrawing or withholding of treatment that results in death.

1.2 There are two broad views of human life: that when we are past our 'used by date' we should be 'checked out' as quickly, cheaply and efficiently as possible – the view that favours euthanasia. The other view sees a mystery in human death, because it sees a mystery in human life, a view that could, but does not oblige belief in a supernatural.

2.0 Responsibility of Government.

2.1 It is the duty of the State to maintain laws consistent with respect for the dignity and worth of every citizen to ensure that the innocent are not killed. The fundamental task of the State is to protect the innocent.

2.2 If the State supports a claim that a person lacks a worthwhile life in law, then the State ceases to recognize that a citizen has binding claims to the State's protection.

3.0 The value of human life.

3.1 The claim that the ongoing life of a person lacks value is a denial of value and dignity to that person since the reality of a person is not something distinct from his or her ongoing life. What underpins euthanasia are the judgments made on the worth of a certain person's life.

3.2 Euthanasia, even when voluntary, involves denial of the ongoing worth of the lives of citizens reckoned to be candidates for killing. Euthanasia is a type of killing that *cannot be accommodated in a legal system* for which belief in the worth and dignity of every human being is foundational.

3.3 The whole exercise of drawing a line between human beings who do, and those who do not, possess value and worth is utterly *arbitrary*. Advocates of involuntary euthanasia such as the philosophers Peter

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Singer and Helga Kuhse show no concern for the subversion of the foundations of justice which their arbitrariness entails.

3.4 A human being will never become a “vegetable or an animal” because the intrinsic value and human dignity of every human being *is not contingent upon their circumstances which are extrinsic to the essence of their humanity.*

4.0 The impact and consequences of legalizing euthanasia.

4.1 Medicine and Law are the principle institutions involved in legalizing euthanasia. In a secular, pluralistic society they are responsible for maintaining the value of and respect for human life. Legalizing euthanasia would seriously damage their capacity to do so. Paradoxically, their responsibility is much more important in a secular society than a religious one, because they are the only ‘game in town’.

4.2 Legalizing euthanasia would fundamentally change the way we understand ourselves, human life and its meaning. We create our values and find meaning in life by living out a socio-cultural paradigm. Humans have always focused on the two great events in every person’s life: birth and death. In a secular society, much more than in a religious one, that focus must encompass and protect the ‘human spirit’ by which is meant the intangible, invisible, immeasurable reality that we need to find meaning in life and make life worth living – that deeply intuitive sense of relatedness or connectedness to all life, between people as well as the world and universe in which we live.

4.3 How would legalizing euthanasia affect medical and nursing education? Would time be devoted to teaching students to administer death through legal injection? It would be difficult, if not impossible, to teach a repugnance to killing and respect for all human life, in a context of legalized euthanasia.

4.4 Health-care professionals need a clear line, a boundary that clearly protects them, their patients and society that they do not inflict death. Patients and the public need to know with certainty – and be able to trust – that this is the case. If a culture of death permeates health care, no patient can be certain his or her trust will not be betrayed.

4.5 Legalization of euthanasia undermines the impetus to develop a compassionate approach to care of the suffering and dying. Sympathy for the affliction and suffering of people becomes diluted since a lethal

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injection is so much simpler. But one cannot care for people by killing them.

- 4.6 To destroy the boundary between healing and killing would mark a radical departure from centuries of legal and medical practice of western civilization, posing a threat of unforeseeable magnitude to vulnerable members of our society represented by elderly persons and those with AIDS and physical and mental illnesses, when doctors who kill hasten to confer on them the "freedom" to be killed.
- 4.7 Women are the majority of victims in assisted suicide by despairing spouses unable to cope with the stress of caring. As women statistically live longer lives than men, they are the most likely targets of physician assisted suicide. (The majority of Dr. Jack Kevorkian's victims up to his imprisonment, were women). If assisted suicide and euthanasia are sanctioned choices, how many women will feel or be pressured to choose them?
- 4.8 Those who promote euthanasia as a "right" should remember that such a "right" quickly becomes an expectation and finally, even a "duty" to die. Ultimately, individuals and families would be forced to put financial concerns above the needs of loved ones.
- 4.9 The practice of euthanasia systematically disposes doctors to kill certain of their patients and inculcates a disposition to regard some patients as not having worthwhile lives. Who and how is it decided a person does not have a worthwhile life? When economic efficiency prevails in the hospital system, would it be the difficult patients; the unappealing; those with a used by date of 80 or 90; the obviously fragile; the demented; the disabled? And eventually, the unproductive and selected criminals?
- 5.0 Dangers of legalizing euthanasia.
- 5.1 Euthanasia undermines and damages important societal values and symbols that uphold respect for human life. How we die is not a simple matter of self-determination and personal beliefs because it involves other persons and society's approval of their actions. Euthanasia overturns the prohibition on intentional killing which the British House of Lords called, 'the cornerstone of law and human relationships emphasizing our basic equality'.
- 5.2 It is important to keep in mind the ever constant drive to reduce health-care costs. Economic cuts rob health professionals of the incentive to find genuinely compassionate solutions or undertake

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research for cures. A culture of death would encourage many to think euthanasia an easier 'solution', a cheaper and less personally demanding solution.

- 5.3 "I have yet to hear of a set of guidelines for euthanasia which would not lead to terrible abuses even in the opinion of those physicians who are willing to practice it. Inevitably, this form of "therapy" would spread to situations in which at present it would be unthinkable" – Dr. J.H. Pincus M.D., Yale University, USA.
- 5.4 ".....Elements in society are always attempting to make the physician into a killer to kill the defenceless child at birth; to leave sleeping pills beside the bed of the cancer patient....It is the duty of society to protect the physician from such demands" – Margaret Mead, anthropologist, 1972.
- 5.5 Euthanasia is destructive of the practice of medicine. Doctors cannot inspire trust and confidence in patients if euthanasia is legalized.
- 5.6 If voluntary euthanasia is legalized then the most compelling reason for opposing the legalization of involuntary euthanasia has been abandoned.
- 5.7 If one can benefit from being killed (the voluntary euthanasia claim), then is it reasonable to deprive people of that benefit simply because they are incapable of being killed? The claim to benefiting by being killed rapidly becomes the belief that a person cannot be harmed by having his worthless life ended.
- 5.8 Legalizing assisted suicide targets terminally ill patients who suffer from depression and the worry about being a financial burden to their family – "then along come the killer doctors under pressure to cut costs and vacate beds" (Ralph Nader, 2000. USA).
- 6.0 Euthanasia in practice.
- 6.1 A strong objection to legalizing euthanasia is that in the Netherlands, if physicians are currently ignoring the law against murder *why would they obey laws governing euthanasia?* Physician's absolute repugnance to killing people is necessary to maintaining people's and society's trust in them.
- 6.2 The Dutch experience of euthanasia has demonstrated the truth of what critics said about any legal accommodation of voluntary euthanasia that it would lead to the extensive practice of involuntary

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euthanasia. In the Netherlands about half of the deaths by euthanasia *are without consent*.

- 6.3 Once a behavioural practice is legal, boundaries soon disappear. To justify legalization of euthanasia on the grounds that the sky would not fall in is the irresponsible swan-song of superficial advocacy and utterly naïve. The same claim was made by apologists for divorce and abortion when they set disintegrative forces in motion that took several decades to undermine public attitudes towards fidelity, social responsibility and human rights – a legacy that still tears Australia apart.
- 6.4 Experience in the Netherlands where there has been relatively little effort to improve palliative care treatments, suggests that the legalization of physician-assisted suicide would weaken society's resolve to expand services and resources aimed at caring for the ill and dying. (Hendin, 1994; Foley, 1995).
- 7.0 Conclusions.
- 7.1 Society's prohibition of intentional killing is the cornerstone of law and human relationships. It protects each human being impartially, embodying the belief that all are equal (which euthanasia explicitly denies).
- 7.2 Euthanasia is a dangerous response to the complex reality of human death. Euthanasia or assisted suicide involves taking the lives of the weakest and most vulnerable people.
- 7.3 Euthanasia converts the mystery of death into the problem of death, for which we can provide a technological solution – a fast, efficient lethal injection to solve the problem of death, but euthanasia is antithetical to the mystery of death. People in post-modern societies are uncomfortable with mystery, especially mystery that generates free-floating anxiety and fear as death does.
- 7.4 Committees in the United Kingdom, USA and Canada in 1994-5 considered the legalization of euthanasia and included members who were on record as being advocates of euthanasia. After considering a mass of evidence and conducting debate, each committee unanimously rejected it.

We do not wish to see that protection diminished and therefore, recommend that there be no change in the law to permit euthanasia. The death of a person affects the lives of others, often in ways and to an extent that often cannot be foreseen. We believe that the issue of

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euthanasia is one in which the interest of the individual cannot be separated from the interest of society as a whole.

It is our hope that you and members of The Legal and Constitutional Affairs Committee will oppose and reject The Rights of the Terminally III (Euthanasia Laws Repeal) Bill, 2008.

Yours faithfully

Jack and Nanette Blair