

## Euthanizing fear: why it won't work

*Social Issues briefing #087, 14/10/2010.*

*Euthanasia is not a treatment for despair and loneliness. Provision of holistic care by a skilled interdisciplinary team of health professionals enables patients and families to acknowledge and attend to distress within themselves and their relationships. The time before death offers unique opportunities for psycho-spiritual growth and allows for healing even without a cure. ... Voluntary euthanasia ... would not have assisted us in our care for our patients.*

*– Thirteen West Australian palliative care specialists*

As proposals for voluntary euthanasia gain momentum, a miasma of fear surrounds them – fear of pain; fear of decline; fear of dependence; fear of abandonment; fear of death. Our community is in slavery to this fear of death, yet seems to believe that we can bypass, short-circuit and cheat these fears by taking a pill. Many Christians are deeply saddened that so many do not know the One who came to ‘destroy the one holding the power of death’ and to ‘free those who were held in slavery all their lives by the fear of death.’ (Heb. 2:14–15 ... words not just about meeting God, but written and heard by those who knew the suffering, pain and decline of death much more intimately than do we.)

Such fear is also tragically ignorant of current end-of-life care practices in modern Australia.

First: many think laws for voluntary euthanasia are for burdensome treatments to be stopped, or for life-support to be switched off, when people are about to die. But these are already best-practice: good end of life care does *not* keep people lingering on endlessly. The N.S.W. Department of Health, for example, has published excellent end-of-life guidelines: no life is unnecessarily prolonged, no one is subjected to burdensome or futile treatments, and people are allowed to die with great dignity.

As journalist Paul Kelly puts it, ‘most people think that turning off life-support machines and discontinuing life-preserving treatment is euthanasia. In fact, this is nothing to do with euthanasia. Indeed, it is the precise opposite of euthanasia. If a family turns off a life-support machine, the patient dies because of their illness, not because of the doctor. But if the doctor gives a lethal injection, then the patient is killed. This is a fine yet critical distinction.’ (The pro-euthanasia lobby offers clever philosophical arguments to erase this distinction. They trade on the grey-zone between death and life. But these arguments are sophistry: *we do something different* when we end a life, as compared to waiting on an unpreventable death.)

Second: thousands of people around the country are working long and hard, right now, to make people comfortable and to help them die well. We call this ‘palliative care’. But in a society so shielded from death, most of us know nothing about it. In the recent Western Australian debate, thirteen palliative care specialists wrote ‘We share many of the goals of those who support euthanasia,’ they wrote, meaning that they agree when patients want to cease pointless treatments, or want to die well at home. These specialists can then control symptoms sometimes by use of ‘deep sedation’ that ‘is both ethical and legal.’

They also observe that contrary to popular opinion, people request death mainly due to despair and loneliness, not pain. ‘Euthanasia is not a treatment for despair and loneliness.’ They write beautifully of what they do instead. ‘Provision of holistic care by a skilled interdisciplinary team of health professionals enables patients and

families to acknowledge and attend to distress within themselves and their relationships. The time before death offers unique opportunities for psycho-spiritual growth and allows for healing even without a cure.' They conclude that a law enabling voluntary euthanasia 'would not have assisted us in care for our patients.' These people are experts on dying. Their judgment deserves our trust.

But a euthanizing culture will eventually sweep away infrastructures like this. The option to euthanize will corrode political will to continue funding end-of-life care, let alone to increase it (as is needed). It will erode funding for research and provision of pain management, mental health initiatives and good aged care. The willingness to euthanize will eventually make it become 'irresponsible' for anyone to want any kind of taxpayer-funded care. We will not see these effects next year, or in ten years. But if voluntary euthanasia is legalized, those of us dying in forty years will die in a very different environment than our parents and grandparents did. Australia really will become a fearful place to die.

To address these concerns, the Social Issues Executive has put a motion before the Synod of the Diocese of Sydney, which is currently in session. It may be amended after discussion, but now reads as follows:

*This Synod, in response to the Greens' notice of motion to introduce into the NSW Parliament a Bill to legalise voluntary euthanasia and the Greens' Bill in Federal Parliament to overturn Commonwealth prohibitions against euthanasia legislation in the Territories –*

- 1. notes that when adequate palliative care, symptom control and psychosocial support is available and accessible, only a tiny minority of those accessing such support express a preference for euthanasia;*
- 2. observes that the outcome of legalised voluntary euthanasia will include the insertion of mistrust into patient-carer and patient-relative relationships, a creeping expansion of candidates for euthanasia, and reduced funding for terminal care;*
- 3. notes that recent reports of community support for euthanasia fail adequately to distinguish the deliberate killing of people from the morally acceptable practice of not prolonging life with burdensome treatment; and*
- 4. notes that most supporters for euthanasia are young and healthy, but that euthanasia legislation is not well supported among people with disability and by people who are old, infirm or vulnerable.*

*Accordingly, this Synod –*

- (a) reaffirms that all human life is precious in God's sight, and that the Bible's clear prohibition of killing innocent humans has the positive effect of creating communities that love and care for others at their weakest and move vulnerable;*
- (b) reiterates its opposition to voluntary euthanasia and physician-assisted suicide;*
- (c) calls upon the Premier and the Prime Minister to oppose these initiatives;*
- (d) calls on the NSW State and Federal parliamentarians to request referral of these bills to parliamentary committees, and to inform themselves of the alternatives to euthanasia and of its negative consequences in jurisdictions that have adopted it; and*
- (e) calls on these governments to increase funding to pain management and palliative care services.*

For those around Sydney, the SIE is also organising the following meeting at Moore College. The panel of presenters will be Dr Megan Best, Andrew Ford, Michael Jensen and Karin Sowada, chaired by Andrew Cameron. We will advocate a definite position against proposals for voluntary euthanasia, but there will be time for questions, clarification and some discussion.

**Voluntary euthanasia: why it sounds good but goes bad.**

7.45 for 8.00pm to 9.30pm, Tuesday 26th October 2010

Knox Lecture Theatre, Moore Theological College

15 King Street, Newtown

*Parking is limited; please consider car-pooling;  
or use one of these buses (all require pre-paid tickets) –  
MetroBus 30 from George St, City South; or any 422 – 428 bus  
from Circular Quay Stand A, Castlereagh St City, or Central Stand A.*

*Alight at Darlington (the stop after the Sydney Uni overbridge and  
Wentworth Building). As soon as bus leaves Sydney Uni Wentworth  
Building, press button to stop at next stop (outside Darlington  
Conference Centre). Walk to traffic lights (Sydney Uni Regiment) and  
cross; turn left; proceed past another bus shelter and the red brick  
Moore College building on your right. Entry to 15 King St is further  
along King St, just beyond a short row of terrace houses, on your right.*

- **Andrew Cameron**  
(for the Social Issues Executive,  
Anglican Diocese of Sydney)

**Sources/further reading**

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Paul Kelly, 'Brown's euthanasia bill a perilous test for Gillard,' *The Australian* 29/9/2010.

[www.theaustralian.com.au/national-affairs/commentary/browns-euthanasia-bill-a-perilous-test-for-gillard/story-e6frgd0x-1225931193178](http://www.theaustralian.com.au/national-affairs/commentary/browns-euthanasia-bill-a-perilous-test-for-gillard/story-e6frgd0x-1225931193178)

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**Note:** This paper is intended to assist discussion and may be corrected or revised in future. Short responses to [social.issues@moore.edu.au](mailto:social.issues@moore.edu.au) are very welcome, but the SIE cannot guarantee a reply. To access this occasional free briefing, use RSS at [www.sie.org.au](http://www.sie.org.au); or to receive it by email, ask us at [social.issues@moore.edu.au](mailto:social.issues@moore.edu.au) or do it yourself at: <http://lists.moore.edu.au/mailman/listinfo/social-issues>.

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