



WHAT IS A "GOOD DEATH?"

Euthanasia proponents allow "mercy" to trump ethics

The term "euthanasia" means "good death" - to provide aid in dying. Those who support euthanasia often use the term "death with dignity" in order to shroud a procedure that most people would shrink from considering. The arguments for euthanasia are subtly appealing to those who are not fully grounded in Christian ethics. The first argument is that mercy is the motivation for assisting someone in death. The second argument is that euthanasia provides the greatest good for the greatest number of people; this comes from a utilitarian worldview. The third argument is equally subtle stating that the Constitution gives individuals the right to make private and personal decisions; this is called the autonomy of the individual. Those who advocate for euthanasia have cleverly exploited human nature and our desire to avoid pain and suffering, the need to feel that our decision is helping others and our desire for autonomy.

Euthanasia advocates completely ignore the distinction between intrinsic and instrumental human value, according to Alan Shlemon, of Stand to Reason. Intrinsic human value is having value within itself, understanding that God is sovereign over life and death and that He created man in His image. It recognizes God's sovereignty in allowing suffering. It acknowledges the fact that suffering brings about perseverance and character and that suffering equips us to help others in similar conditions. Instrumental human value, according to Shlemon, is the value of life as a means to an end. "Quality of life" and what a person contributes becomes a factor in determining instrumental value. Suddenly the sick and infirm are faced with the decision of a "duty to die" to avoid mounting medical bills, to avoid being a "burden" to their families and a sense of responsibility to society not to place an undue burden.

The "Right to Die"

When one considers the granting by the Constitution a right to make a personal decision to die, we find that the Constitution gives an individual no "right to die." There is no explicitly stated right to privacy in the Constitution despite pro-abortion and pro-homosexual claims to the contrary. The right to life is absolute, but the right to privacy is limited. The right to die never takes precedence over the right to life in the Fifth and Fourteenth Amendments to the Constitution. The Declaration of Independence clearly calls the right to life an unalienable right by which we are endowed by our Creator. Active euthanasia or the direct and intentional efforts of a physician to help a dying patient is killing.

Passive Euthanasia

"Termination of life support" (TLS) is passive euthanasia. According to Shlemon, on this issue one has to distinguish between basic medical care and medical treatment. Basic care is defined as the nutrition and proper environment that any healthy person needs to survive, while medical treatment is any activity that uses technology or a treatment to remedy a disease

or illness. The possible exception is when the treatment is to ensure that basic care is provided, such as a feeding tube that facilitates feeding and hydrating a patient. We also must distinguish between ordinary and extraordinary treatment. Ordinary treatment is any course of treatment that offers a reasonable hope of benefit without placing an unnecessary burden on the person. In other words, the benefit outweighs the burden. Extraordinary care is any course of treatment that involves excessive burdens and doesn't offer a reasonable hope of benefit, such as refusing radiation for terminal cancer that would give no expectation of benefit. Unfortunately, in 1986 the American Medical Association determined that a feeding tube is medical care; thus Terri Schiavo's feeding tube was removed by the courts, and she died a lingering death by starvation and dehydration even though she could, prior to the insertion of the feeding tube (requested by nurses to facilitate their job), eat and drink on her own.

Cause for Concern?

The causes for concern in a society that increasingly calls for the ending of life either by the patient themselves or by the physician are many:

- Modern technology coupled with a cultural degeneration of ethical principles has led to patients entering hospitals in the Netherlands (where physician-assisted suicide is allowed by law) to hire advocates to protect them from being euthanized.
- The graying of the U.S. population . . . the inverted triangle with the aging population being supported by a diminishing workforce. Utilitarian worldviews will possibly come into play when money is running out.
- An established, highly effective healthcare system with an uneven distribution of healthcare usage will cause many to carefully consider who "deserves" to live and who will "contribute" to society.
- A growing national debt will cause many to look at services and agencies providing help to disable, ill and elderly citizens.

The Humanist View

The Humanist Manifesto II specifically recommends abortion, suicide, and euthanasia. The humanists reject God, elevate man, and accept the view of situational ethics. "The universe is self-existing and not created." Further the humanist claims that ethics are "autonomous and situational" needing no theological or ideological sanction." Humanist Manifesto II p. 17

Christian Ethics

Christian ethics require that we compassionately care for those who are ill, disabled or injured; Christian ethics recognizes the intrinsic value and worth of every human being from conception to natural death. Christian ethics sees God as the sovereign giver of life and the One who brings death at the appointed time. "Our days are numbered before there was yet one . . ." Psalm 139

Note: All of this content was taken from a sermon delivered at First Family Church, Overland Park, Kansas, and from a talk on the same day by Alan Shlemon. www.fcc.org Christian Ethics Series