

Euthanasia and Human Dignity: A 21st Century Crisis through the Eyes of Aquinas

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Introduction

In the present world, the value of human dignity is challenged in many ways. With the passage of time, issues against human dignity are on a gradual rise. Amidst all these complex adversaries, *Euthanasia* becomes our focal point here. While some parties decriminalize euthanasia, others oppose it. So, the debate of euthanasia should be addressed in a sensitive approach. It is unacceptable to extend euthanasia to the scope of medicine. It surpasses the demarcations of biology and bioethics, extending it to the scopes of ethics, morality, culture, and religiosity. This paper mainly focuses on two aspects: euthanasia in the 21st century and the Thomistic approach to this present trend. It is obvious that St. Thomas Aquinas is in a *tabula rasa* state with regard to euthanasia in the 21st century, but his timeless philosophical and theological insights are tremendously applicable to address this present adversity. Furthermore, this study consists of understanding the concept of euthanasia, the evolution of euthanasia throughout human history, the Sri Lankan view towards euthanasia in the 21st century and an original survey conducted among medical professionals on this subject.

Methodology

The relevant information for the study was gathered from secondary sources, such as research papers in medical annals, relevant books and browsing the net. Data for the survey was collected via an online platform by surveying among medical professionals.

Introducing Euthanasia

Defining euthanasia, or so-called *mercy killing*, in a simple sense is an intentional act of painlessly putting a person to death, afflicted with an incurable and critical disease, and allowing them to die by withholding or withdrawing treatments or life supports. Euthanasia has its various scopes and in distinguishing the scope they can be designated as active euthanasia (a direct intentional act that causes death through administering a lethal injection), passive euthanasia (an intentional act to avoid prolonging the dying process through withholding treatments and withdrawing artificial life supports), voluntary euthanasia (patient explicitly request to die), non-voluntary euthanasia (end of life decision made to a patient in a vegetative state who is unable to present the consent), involuntary euthanasia (end of life decision made to a patient who consciously request that his life should be sustained under his terminally ill condition) and finally, *physician assisted suicide* also known in an abbreviated term as PAS (patient carries out his own death but assisted by a physician responding to the explicit request of the patient) among these involuntary euthanasia is morally and ethically debated among many.

The etymology of the word 'Euthanasia' derives from Greek, 'εὐθανασία', which means 'good death': εὖ, eu, 'well, good' and θάνατος, *thanatos*, 'death'. This idea of euthanasia dates back to ancient times. Though the etymology stands as 'good death,' it has generated many controversies in ethical, moral, social, and religious debates. Euthanasia is a sensitive issue because it falls within the boundaries of human life, human rights, and finally addresses human dignity. The end of euthanasia is obviously death, and death is always a loss. The objective of euthanasia is to provoke death and eliminate the suffering of a terminally ill patient. Considering euthanasia, there are a few secondary facts to address. Firstly, patients' consent, which gives respect to individuals' autonomy, being free of coercion. Secondly, the fatal nature of the infirmity. Third, the absence of pain of death caused by the administration of drugs such as analgesics, opioids, anaesthetics, and even highly potent muscle relaxants. The final secondary fact is how the action is performed within the frame of legislation. Bioethically, euthanasia is a too-sensitive issue. Though euthanasia in the present sense originated in the 20th century, it has now shifted to a controversial state in the 21st century.

Evolution of Euthanasia in Human History

Plato, in his work 'Republic', book 3, stated that the one who lives amidst various illnesses and medicine, and physically unhealthy people, should be left to die, but opposing Plato's view, Hippocrates stood in a position against euthanasia. Further, it is visible that Aristotelians, Pythagoreans, and Epicurians strongly condemned the practice of euthanasia in Greek civilizations. In Roman territories, individuals who were terminally sick committed suicide due to various reasons, such as impatience, lack of resolution to pain, and unavailability of medicines.

Coming to the Middle Ages, due to the spread of Christianity, euthanasia became a silent practice. Middle-aged Christian thinkers, like Augustine, stated that suicide is an abominable and detestable act. The ones who acted against his physical integrity were excommunicated. During the Middle Ages the view about physical suffering was shifted to another perspective, which considered suffering to be sacred and a path to glorification.

It was in the time of enlightenment that euthanasia acquired its current meaning. Renaissance thinkers like Francis Bacon and Thomas More supported euthanasia. They stood up with the idea that the end of suffering of a terminally ill patient helps him achieve a dignified death. Even in 'Utopia' written by Thomas More, it states that necessary care should be given to the dying, and if the patient wills, he can end his sufferings with the guidance of responsible authorities by administering lethal drugs. However, many Christian theologians of the Renaissance opposed these ideologies. Similarly, even physicians of that time rejected the work of justifying euthanasia.

Modern debate on euthanasia began in the first half of the 20th century. In this period, euthanasia was influenced by eugenics, utilitarianism, social Darwinism, and new thinking schools of Germany and England. Those were the triggering facts for euthanasia. Especially, euthanasia was destructively misused in Nazi concentration camps. According to the report of the Nuremberg International Military Tribunal 1945-1946, approximately 275,000 people with physical and mental disabilities were subjected to death. For the Nazis, euthanasia was a tool to conduct their genocide. The annals of history very authentically prove that euthanasia was traumatic throughout human history.

Euthanasia in the 21st Century

Though the modern understanding of euthanasia originated in the first half of the 20th century, currently, it is clear that it is taking a complex form. Now it has become a highly debated issue in the landscapes of ethics, morality, and legislation. The number of individuals going for end-of-life decisions is accelerating. The main cause for the rise is the increase in incurable diseases. Many fatal cancers, AIDS, Alzheimer's disease, muscular dystrophies, and dementia have been on a significant rise in the past two decades. Especially with the modern thinking patterns and the perspective on individual autonomy, there is a natural tendency to approach euthanasia. Due to these factors, presently, euthanasia is a very sensitive issue when compared with the past.

Legal legitimacy of Euthanasia across the Globe from 2000 to 2025

Still, euthanasia remains illegal in many countries, but a certain number of jurisdictions have taken measures to legalize euthanasia based on certain circumstances. The countries and regions where euthanasia has already been legalized have focused on two basic factors: first, to respect patients' autonomy, and second, to end suffering. Below will be the countries where euthanasia and physician-assisted suicide have already been legalized.

Netherlands: This is the first country to legalize euthanasia under the 'Termination of Life on Request and Assisted Suicide (Review Procedures Act)' in 2001. This act legally allowed active voluntary euthanasia and physician-assisted suicide under certain criteria,

- The patient must have unbearable and intractable suffering with no prospect for improvement.
- An expressed wish of the patient to die.
- The patient must be fully informed and mentally capable of making a free decision.
- The patient's request should be voluntary and persistent.
- No reasonable alternatives are available for the patient.
- Two independent physicians should confirm the diagnosis and prognosis of the patient.

In the Netherlands, not only adults but also youngsters above 12 years are eligible to request euthanasia under strict criteria. Regarding this, there remains a big question mark about whether children are mature enough to come to an end-of-life decision.

Belgium: In 2002, the Belgian euthanasia act was passed. Further, in 2014, it was again extended even to terminally ill children. Belgium was the second country to legalize PAS, and concerning permissive laws. Belgium is unique compared to other countries where euthanasia is legalized. It is because Belgium allows a physician to administer lethal drugs to mentally ill patients. In Belgium, it is allowed to go for euthanasia for patients in a non-terminal situation but suffering from unbearable pain for which there is no relief.

Canada: 'Medical Assistance in Dying' (MAID) was enacted in June 2016, allowing euthanasia and PAS to practice among the gravely and irremediable medical conditions.

The laws were again broadened in March 2021, allowing a patient to request euthanasia even though there is no definite time frame for the patient's death, as diagnosed by medical professionals. This allows a patient who is not in a critical condition but in unbearable pain and long-term incurable sickness to voluntarily decide upon their life.

Luxembourg: Legalized euthanasia in 2009 by passing the 'Palliative Care/ Euthanasia Act'. This is the third country to legalize euthanasia. If a patient continuously requests euthanasia due to the unbearable pain and incurable illness, doctors can go for euthanasia.

Ecuador: From the constitution, Ecuador has decriminalized euthanasia. Their focus is on a dignified death, terminating intractable suffering.

Spain: Previously, in Spain, if assisting an individual to commit suicide, they were sanctioned to carry a prison term of 10 years. However, on 25th June 2021, Spain enacted laws allowing euthanasia. Spain became the fourth country to legalize euthanasia in the European Union.

New Zealand: The initiatives were taken to legalize euthanasia in 2019 through enacting the 'End of Life Choice Act', which permits eligible adults to decide on their end-of-life decision. Here, the interesting fact is that euthanasia or PAS can be requested by patients who are expected to die within six months, as diagnosed by a physician. The law was totally accepted in 2021.

Switzerland: Only PAS is accepted under strict conditions. In this case, a significant medical organization takes prominence, namely 'Dignitas', a non-profit organization providing PAS to terminally ill and physically and mentally unhealthy people. The objective of this organization is to provide lethal medications to those who request them.

Australia: the act named 'Voluntary Assisted Dying' (VAD) allows only PAS to be practiced. Even this is allowed in several regions, viz, Victoria, Western Australia, Tasmania, South Australia and northern areas. Terminally ill patients whose death is expected in six months are only eligible to go for PAS.

USA: although euthanasia is illegal in many states. But certain states permit the practice of PAS only. Such as California, Colorado, the District of Columbia, Hawaii, Maine, Montana, New Jersey, New Mexico, Oregon, Vermont, and Washington.

The Direction of Ethics and Morality in the Evolution of Euthanasia in the 21st Century.

"Man is a rational being", uniqueness of a human being relies on their unique ability to reason out, logical thinking and decision making. This distinguishes man among other beings. Rationality is the root cause that brings us to morality, and morality makes a rational being a moral being also. Both negotiate together as two sides of a coin. To bring euthanasia to an equal scale with morality and ethics is quite controversial. While analyzing the contemporary trend of euthanasia, three main approaches propose it:

- i. Respect for personal autonomy
- ii. Alleviation of suffering.
- iii. Dignity of death.

While considering personal autonomy, individuals come to the idea that each one can deliberately and voluntarily decide upon their own life. It is obvious that personal autonomy is a fundamental human right, so pertaining to this, proponents argue that euthanasia respects and values human freedom. Coming to euthanasia in the scope of personal ethics, how does an individual come to a conclusion to take an end-of-life decision, what would be his criteria, and will he voluntarily consider whether it is right or wrong? So, these subjective views set a question mark in the ethical and moral approach towards euthanasia. In another sense, if euthanasia is legally allowed, certain vulnerable individuals can consider this as a 'slippery slope', thinking that euthanasia is better rather being a burden to oneself and others. Personal autonomy should not be a hindrance to morality and rationality related to human beings.

Euthanasia is considered to be an option to end suffering, both physically and psychologically. It is true that fatal patients with incurable diseases definitely undergo intensive pain, but in order to terminate the suffering, is it ethically and morally acceptable to decide upon one's death? It raises questions about the value of life and the integrity of human dignity. Though the current trend considers euthanasia as a way for a dignified death, viewed in the ethical and moral scopes, it is an invitation for many controversial debates.

Sri Lankan View on Euthanasia in the 21st Century.

Obviously, euthanasia and PAS are strictly prohibited in Sri Lanka. The penal code of Sri Lanka strictly prohibits aiding suicide.

"If any person commits suicide, whoever abets the commission of such suicide shall be punished with death." (PC, Article 299)

Furthermore, if there is any act with such intention or knowledge and if it causes death, the person would be guilty of murder. It is mentioned in the article 300 in PC under the subtopic of 'Attempt to Murder'. Attempting to commit suicide is also considered an offence in Sri Lanka.

"Whoever attempts to commit suicide and does any act towards the commission of such offence, shall be punished with imprisonment for a term, which may extend to one year or with a fine, or with both." (PC, Article 300)

Even a terminally ill patient attempting to commit suicide with the assistance of a physician is clearly an offence. According to the PC, any artificial deprivation of life is not accepted, except in the case of aborting an unborn child, when the mother's life is in danger. This is the only condition permitted.

Even though modern Sri Lankan society is secularized, the religiosity and cultural values remain in a significant status. If some parties take the initiatives and relevant measures to legalize and decriminalize euthanasia in Sri Lanka, it will definitely become a controversial issue.

Survey Report: Euthanasia Views among Medical Professionals in Sri Lanka

An original survey was conducted among medical professionals in Sri Lanka to gain an understanding of their views on euthanasia. A total of 53 doctors participated in the

survey, which was carried out via a Google Forms questionnaire. The survey included respondents from various regions, with a significant number from Colombo, Kandy, and Jaffna.

Demographic Background

Most of the physicians who participated in the survey were aged between 46-60 years, with 32 respondents (60.4%) in this age group. A considerable number of participants were aged between 30-45 years, accounting for 35.8% (19 respondents). Additionally, two doctors were above the age of 60.

Regarding the sector in which the doctors are employed, the majority work in the government sector (46 out of 53, or 86.8%). A smaller proportion works in the private sector (4 respondents, 7.5%), and the remaining 3 are employed in various clinics.

The survey also asked about the respondents' years of medical experience. The largest group of respondents had been practicing for over 16 years.

When considering religious affiliation, the majority of respondents identified as Buddhist (54%, or 29 respondents), followed by Christians (32.1%), Hindus (7.5%), and Muslims (3.8%).

Knowledge and Opinions on Euthanasia

Regarding familiarity with the term "euthanasia," a vast majority (50 out of 53, or 94.4%) reported that they were aware of the term.

When asked whether euthanasia or Physician-Assisted Suicide (PAS) should be legalized in Sri Lanka, the responses were as follows:

37.7% (20 respondents) supported legalization

43.4% (23 respondents) opposed legalization

18.9% (10 respondents) were unsure.

On the ethical and moral acceptability of various forms of euthanasia, the responses were as follows:

35.8% (19 respondents) supported voluntary euthanasia

32.1% (17 respondents) supported passive euthanasia

15.1% (8 respondents) supported PAS

39.6% (21 respondents) stated that none of these forms of euthanasia are ethically acceptable.

When asked if euthanasia contradicts the professional medical duty of "do no harm," the responses were nearly split:

49% agreed

51% disagreed.

Ethical and Religious Considerations

Regarding the influence of religious and moral beliefs on views toward euthanasia, two-thirds (64.2% or 34 respondents) confirmed that their religious and moral beliefs play a significant role in shaping their opinion on the matter.

In response to whether human dignity is preserved through natural death, even in cases of suffering, the responses were almost evenly split:

51% agreed, believing that dignity is preserved despite suffering

49% disagreed, suggesting that prolonged suffering may compromise the value of human dignity.

Suggestions for End-of-Life Care

The survey also asked the doctors about their preferred approaches to end-of-life care. The responses to various options were as follows:

<i>Option</i>	<i>Number of Respondents</i>	<i>Percentage</i>
Pain Management	43	81.1%
Palliative Care	42	79.2%
Counselling/ Spiritual Care	35	66%
Family Support Systems	35	66%
Peer Group Support	1	1%

Conclusion on Survey

This survey provides valuable insights into the views of Sri Lankan medical professionals on euthanasia. A significant majority are familiar with the concept, yet opinions on its legalization and ethical implications are divided. While there is some support for the legalization of euthanasia and certain forms, such as voluntary and passive euthanasia, many respondents reject euthanasia on ethical grounds, especially in light of the medical principle of "do no harm."

Religious and moral beliefs play a crucial role in shaping the doctors' views, and a large proportion of respondents believe that human dignity can be preserved even in the face of suffering, though a near-equal number disagree. The findings also highlight a strong consensus on the importance of pain management, palliative care, and family support systems in end-of-life care, while there is minimal support for peer group support.

Overall, the survey suggests that while there is some openness to discussing euthanasia, especially in the context of voluntary and passive euthanasia, ethical, moral, and religious considerations are key factors influencing medical professionals' opinions. This indicates a need for continued dialogue and careful consideration of both legal and ethical frameworks surrounding euthanasia in Sri Lanka.

Responding to Euthanasia from the Approach of St. Thomas Aquinas

According to the Thomistic view, man has to be considered in two scenes. One is the spiritual creature, and the other is the corporeal creature. Man's dignity is not simply contained in the corporeal substance; man's nature becomes significant because of the spiritual nature, the soul. Soul is related to the body and body is related to the soul. Soul becomes the principle of intellectual operation. Though it depends on corporeal substance, it gives the knowledge to understand the corporeal realities. So, a man composed of body and soul is an intellectual being who is rational and voluntary. Man is obviously created with dignity, a dignity given by God according to his image and likeness. Due respect for humans should be given among all the modern adversities. As we have discussed before modern view of euthanasia stands for three factors:

- I. personal autonomy
- II. Alleviation of pain
- III. Dignified death

This idea stands as the foundation stone in the modern understanding proposing Euthanasia. Let us now approach this modern trend through the lens of Aquinas.

Approaching Personal Autonomy from the View of Aquinas.

Aquinas says, free will consists of two parts:

- I. Reason
- II. Natural instinct

Coming to the natural instinct, it pertains to irrational beings, who lack knowledge and acts with natural instincts. For example, when a deer meets a wolf, it instinctively escapes. So, in the case of a man definitely he is definitely rational. Rational beings intrinsically have free will. The important fact to apprehend is, free will is given by God, and Aquinas further says that it is moved and helped by God. God is the first cause who moves natural and voluntary causes, but he has gifted man to act freely by being conscious and rational.

Will is the rational appetite of a voluntary act, and they are proper only to man, and man is the master of his own action. The word "voluntary" derives from the Latin word '*voluntas*', which means "will". The will and the choice of action are within us, but Aquinas' position presupposes that with the help of God, man is inclined to choose or reject something according to his free will.

Further, Aquinas, in his position of voluntariness, says that a voluntary act is a rational operation. Irrational animals cannot perform voluntary acts; rather, it is a matter of perfect knowledge pertaining only to human beings.

Coming to euthanasia in this Thomistic approach, we clearly and respectfully accept the value and respect for personal autonomy, more than as the creator God respects and values personal autonomy. While acting with personal autonomy, it should always be in our minds that the giver of the free will to act with deliberation. Our free will should not contradict with will of God. God never wills anyone to destroy himself. As human beings are created in the image and likeness of God. If anyone attempts to commit suicide, it is a deliberate offence done against the image of God and an injustice done to the free will.

God will not influence our will, but it is the duty of the individuals to respect personal autonomy by walking in the precepts of God.

The Thomistic Approach to the Alleviation of Pain through Euthanasia

It is undeniable that human beings have a natural dislike towards pain. Each one clings to the relief from body and mind aches. Coming to the landscape of euthanasia, with the present trend, it has given the chance to terminate pain by opting for euthanasia. Even Aquinas accepted the difficulty of pain and its harmfulness to the body and soul,

“We speak of pain of the body because the cause of pain is in the body; as when we suffer something hateful to the body. But movement of pain is always in the soul: since the body cannot feel pain unless the soul feels it, as Augustine says.” (Aquinas, Summa Theologica i-ii, Q-35/A-I, 740)

Physical pain will not pertain only to human anatomy but also to the mind and soul. Physical pain carries many sorrows in a whole sense. According to Aquinas, the harmfulness of pain is because it is repugnant to man’s life. Accepting all these natural realities of pain, finally Aquinas gives a wonderful response,

“Thus, it is clear that in pain or sorrow there is a good, by removal of which becomes worse...” (Aquinas, Summa Theologica i-ii, Q-39/A-4, 759)

Therefore, Aquinas’ standpoint is, pain or suffering is not man’s grievous evil. However, sorrow or pain appears as evil but it is a good in reality. Further, Aquinas has stated that sorrow or pain is an admixture of good.

Aquinas is challenging the present world and the trends of euthanasia. It calls for a deeper reflection to search for the goodness in pain rather than being vulnerable to opt for death.

Dignified Death in the Lens of Aquinas

In Summa Theologica, Thomas Aquinas quotes Augustine’s City of God, answering the above topic,

“Hence it follows the words, ‘Thou shall not kill’ refer to the killing of man; not another man, therefore, not even thyself. For he who kills himself, kills nothing else than a man.” (Civitate Dei I, 20)

According to Aquinas, man cannot kill himself because it is an injustice done to himself. So, standing in Aquinas ‘point of view, the simple argument is, how can an unjust act call for a dignified death? Aquinas proposes three reasons with regard to the unlawfulness of killing oneself,

- i. Everything naturally loves itself.
- ii. Everything naturally keeps everything in being.
- iii. Everything resists corruption as far as it can.

Aquinas stands in a position that tells us suicide is against charity:

“Wherefore suicide is contrary to the inclination of nature, and to charity whereby every man should love himself. Hence, suicide is always a mortal sin, as being contrary to the natural law and for charity” (Aquinas, Summa Theologica ii-ii, Q-65/A-5, 1463)

Going far deeper, Aquinas states that suicide is against community and it is an injury to the community, since each individual who commits suicide is a part of the community.

Life is the most precious God given gift, and human life is subject to the power of God. Suicide is a great offence against God. Man is the master of himself, and he has been gifted with free will, but it doesn't mean that he is subject to the supremacy of God. The danger of euthanasia is that it doesn't give time to repent. It is an act of injuring oneself, to whom he owes the greater love. PAS also falls into the same category. Moreover, it is said that it is against the justice of a community.

Finally, according to the Thomistic approach, euthanasia is a mortal sin because it is in relation to God, in relation to the community and in relation to oneself.

Measures which can be Initiated instead of Opting for Euthanasia in a Thomistic View.

In the Thomistic approach, euthanasia is unacceptable. In order to uphold the integrity of human dignity, euthanasia remains a stumbling block in the present days. According to Aquinas, so-called 'dignified death' won't pertain to euthanasia because it is an injustice done against human dignity. To eradicate the offensive nature of euthanasia, individuals or responsible people can opt for certain measures instead of going for euthanasia. End-of-life care is a debatable topic in bioethics, existing legal frameworks and personal perspectives. Leading the terminally ill patients for palliative care, facilitating the hospice facilities for terminally ill and upholding the bio-ethical awareness among medical professionals owing to the existing situations are some of these measures instead of approaching euthanasia. Especially, palliative care should be initiated with the aspects of mental, physical and spiritual aspects, so patients may receive an integral end-of-life care, which will uphold the value of human dignity in a thousand-fold amidst all the present adversaries.

Conclusion

Coming to the end of this work and having discussed euthanasia in an informative sense, it is crystal clear that euthanasia is gradually on the rise compared to the past. In reality, it is true that certain patients view this as a slippery slope to end their lives due to their terminal illnesses. Even certain jurisdictions allow this practice. Moreover, bioethical approaches have been flexible to a certain extent. After all, when approaching this issue through a Thomistic lens, it is evident that euthanasia contradicts free will, the sacredness of suffering, and overall human dignity. Euthanasia transcends biology. It should be accepted that the dignity of the human being is above medical supremacy. The Thomistic approach is influential on this issue because it encourages deep reflection on human dignity. Every instance of euthanasia committed is an utter disgrace to humanness. In the context of voluntary euthanasia and PAS (Physician-Assisted Suicide), it is even more grievous. If such acts are generalized and decriminalized based on human perspectives, it should be considered an act that degrades the integrity of human dignity. From Aquinas' standpoint, euthanasia is a grave injustice, manipulation, a disgrace to God-given free will, and a severe devaluation of human dignity, especially in the context of the 21st century. To change this direction, individuals should primarily understand the value of human dignity in a virtuous sense.

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