

This article was published online by [The Conversation](http://theconversation.com). It is available online at <http://theconversation.com/how-to-draw-the-line-between-good-and-bad-reasons-to-die-34012?>. This work is licenced under a CC BY-NC 3.0, <http://creativecommons.org/licenses/by-nd/3.0/>

# THE CONVERSATION

11 November 2014

## How to draw the line between ‘good’ and ‘bad’ reasons to die

**Sascha Callaghan**

A Senate inquiry into legalising voluntary euthanasia for terminally ill people has recommended [a conscience vote](#) on the proposed bill after technical matters, such as what constitutes a “terminal illness”, are clarified.

While this is an important step forward in grappling with the idea of the “right to die”, drawing a line at terminal illness for this purpose will be difficult. What’s more, restricting the right to die to people who are terminally ill is very different to what most of us think of as justifiable euthanasia.

Research shows more than [82% of Australians support voluntary euthanasia](#) where “a hopelessly ill patient, experiencing unrelievable suffering, with absolutely no chance of recovering” asks for help to end their life. This description covers terminal illnesses as well as other incurable conditions causing great suffering in which death may not be imminent.

### **Refusing treatment**

As the law stands, mentally competent people can reject medical treatment that will keep them alive. This is the case even when a person is not actually terminally ill. As suicide itself is not unlawful, it remains an option even when the person states their sole motivation for refusing treatment is to end their life.

Courts have confirmed that life-support machines can be turned off, [feeding tubes can be removed](#) and [hunger strikes in hospital](#) may not be forcibly interfered with by hospital staff. These cases involved people suffering extensive paralysis and chronic debilitating illnesses, all of which caused pain and suffering but were not, strictly speaking, terminal conditions.

Indeed, that was part of the problem the people in these cases faced: in their own estimation, their suffering was great but their lives might go on for a very long time. Still, while all competent patients may refuse medical treatment in order to end their lives, they may not be entitled to active euthanasia under a restricted law.

If it's not exactly terminal illness that Australians have in mind when they think of who might legitimately seek euthanasia, and if we can tolerate and even condone the suicidal wishes of some people, it is perhaps a particular kind of suffering that we wish to restrict euthanasia to.

Perhaps we feel physical suffering is a better reason for ending one's life than, say, suffering caused by grief, or shame, or hopelessness. Or perhaps it is the quality of "incurability" that we demand; we are more willing to accept physical illness may be beyond help, than psychiatric illness or emotional pain.

The problem is that while many of us may hold these views, they aren't empirically true, and opinions differ.

In some jurisdictions where euthanasia is legal, it is also legal to be helped to die because of psychiatric illness when there is "unbearable emotional suffering". While this has been controversial, groping for objective reasons why only some forms of death decision are all right is doomed to fail because the lines we draw between acceptable and unacceptable death decisions are cultural and arbitrary.

But that doesn't make such line-drawing invalid.

### **The right line**

To achieve defensible policy, we need to understand what's really going on when we struggle with legalising assisted suicide. And it is simply this: the decision to die is not an ordinary choice.

Deciding to end one's life has the quality of tragedy – and not only for people who love you, as not everyone has loved ones. Rather, all our deaths are important because, as the [English poet and cleric John Donne](#) wrote, we are all "involved in mankind".

Death remains tragic no matter how inevitable it is or what causes it. And in a very deep place, human societies have always considered death itself to be bad, in a moral sense.

Death is punishment; in many cultures, it is what separates us from ancient gods. The inevitability of death is the ultimate source of existential suffering because all of us know we will die, as will everyone we love.

So even if we can bring ourselves to accept that a life can be so full of suffering that death is preferable, we still remain deeply anguished about it.

If society is going to be involved in death decisions by giving legal permission for doctors to bring about death, it is important to specify some conditions. But there will be few bright lines to discern between "good" and "bad" reasons for choosing death.

We do need to decide which deaths we are prepared to countenance. We may each decide quite differently. But all of us must think long and hard about where and why we draw those lines.