

Thanatos

ISSN 2242-6280, vol. 5 2/2016

© Suomalaisen Kuolemantutkimuksen Seura Ry.

https://thanatosjournal.files.wordpress.com/2016/12/terkamo-moisio_lectio.pdf**Lectio praecursoria: Complexity of Attitudes towards Death and Dying**

TtT Anja Terkamo-Moisio väitteli syyskuun 23. päivä kuluvana vuonna Itä-Suomen yliopistosta, aiheenaan kuolemaan ja eutanasiaan kohdistuvien asenteiden monitahoisuus (*complexity of attitudes towards death and euthanasia*). Vantaväittäjänä hänellä oli professori Chris Gastmans Leuvenin katolisesta yliopistosta ja kustoksena professori Anna-Maija Pietilä Itä-Suomen yliopistosta.

“Death and dying are not the most popular topics of discussion. It has even been suggested that individuals would completely deny the topic of death if given the opportunity. But it is not possible. Regardless of whether we like it or not, mortality is an essential part of humanity. Each person will face death in one way or another and for some of us, for example nurses, encountering death is part of the profession.

Nowadays, most individuals in Europe die in hospitals or other institutions of health care. In Finland, for example, over 50,000 people are dying each year. Statistics from 2014 reveal that 67% faced death in a health care facility and 18% died in a private apartment, usually at home. These figures demonstrate that the majority of dying persons receive care provided by nurses and other health care professionals at the end of their lives.

Death-related thoughts are as inevitable as death itself. One’s thoughts and feelings about death may be called their attitudes. These are individual and may differ greatly from one person to the next. Previous research has mostly focused on individuals’ negative attitudes towards death, such as fear of death or death avoidance. However, death may also be connected with neutral or positive attitudes. For example, some individuals regard death as a natural part of life. They do not welcome death but are also not afraid of it. Similarly, for others, death may represent a passage to a happy afterlife or a possibility to escape a life filled with pain and misery. Usually, individuals share a combination of different kinds of attitudes that have one thing in common: they influence the way humans live their lives.

In addition to increasing the understanding of individuals’ actions, knowledge of individuals’ attitudes may even enable predicting human behaviour. Previous research has demonstrated that nurses’ attitudes towards death are closely linked with the quality of care they provide as well as their willingness to care for dying people. Nurses may feel sadness, frustration or helplessness when they encounter the death of their patients. Hence, dealing with death has been acknowledged as one of the risk factors for professional burn out of nurses. Experiences in the beginning of nurses’ career are particularly significant in this matter, because they lay the foundation for the future end-of-life care that nurses provide. Mentoring and

support from peers after nurses' first encounters with death are crucial for the development of positive attitudes towards death and the quality of provided care at the end of life.

Death may be observed also in a broader context. It has been argued that much can be concluded about a society and its values based on the way it deals with death-related issues or its dying members. The Finnish society has claimed to be efficient and performance-oriented. However, in recent years, death-related questions have received more attention within the society. Different projects have been launched that organize training, events and seminars related to death. They aim to further raise death-related themes into the public discussion, which has been considered necessary. At the end of the day, dying matters and individuals hope for what they perceive as a 'good death'.

Based on the fact that death inevitably leads to the end of the irreplaceable human life, it is worth asking if such a thing as a good death even exists. Furthermore, the concept of good death is not only individual, but it has also changed over time. Prior to the rise of modern medicine, a good death was strongly influenced by religion. To die in peace with God and one's neighbours was desired. Having family or friends at the bedside or being free of physical pain was considered to be an additional bonus of secondary importance. Today, a good death includes physical, psychological, social and spiritual aspects. However, it also includes an element of control that is a result of the immense possibilities of modern medicine: Control that goes beyond the treatment of symptoms, even including the timing of one's death. Euthanasia and individuals' right to decide about their own death have become essential parts of discussions related to a good death.

Euthanasia refers to a deliberate act to terminate a person's life at his / her own explicit request. Based on this definition, four core-characteristics of euthanasia may be identified. First, an explicit request of the person who wants to die is needed. Ending a human's life without his / her explicit request is not euthanasia, it is something totally different. Furthermore, in euthanasia, the aim is to terminate life and the action is intentional. Therefore, euthanasia does not occur by accident nor does it mean withdrawal or withholding of treatment. Lastly, euthanasia is always performed by someone other than the person requesting it. This sets euthanasia apart from physician-assisted suicide, where the person who wants to die takes the lethal medication by him- / herself.

In most parts of the World, euthanasia is regarded as an illegal act. In Finland, performing euthanasia could result in imprisonment of four to ten years. Currently, euthanasia is performed legally in Belgium, the Netherlands, Luxembourg and, since 2015, also in Columbia. Furthermore, euthanasia was legalised nationwide in Canada in June 2016, where for the first time, the nurse practitioners are, in addition to the physicians, allowed to administrate the lethal medication. There are also ongoing discussions on euthanasia and its possible legalization in several countries such as Australia, France and Spain.

Debate on euthanasia is not a new phenomenon in Finland. The authors of the preliminary report of the Committee for the Future of the Finnish parliament predicted already in 2004 that there would be increased approval of euthanasia and its legalization in coming years. Moreover, they forecasted that Finland would legalize euthanasia within the next 10-15 years. The discussion intensified again in 2012, as the Finnish National Advisory Board on Social Welfare and Health Care Ethics stated that, in some occasional situations, the possible use of euthanasia may not be completely excluded on ethical grounds.

In Finland, euthanasia has been discussed mainly from the political, theological and medical perspectives. By contrast, the voices of nurses have remained unheard, although their crucial role in end-of-life care as well as in the process of euthanasia has been widely recognized. Moreover, possible changes in this regard would affect over 100,000 nurses in Finland. The

fact that Finnish nurses have no right to conscientious objection highlights the significance of knowledge about their attitudes towards euthanasia.

In general, little is known about the attitudes towards euthanasia among Finnish nurses or the general public. The latest study on the issue was published in 2002 and concluded that around half of the participants in both groups reported acceptance of euthanasia. By contrast, Finnish physicians' attitudes became more approving between 2003 and 2013. Based on different inquiries, the general public has been suggested to support euthanasia and its legalization; however, this lacks scientific evidence.

International comparison of the attitudes towards euthanasia is complicated partly due to the diversity of definitions that have been used in previous studies. Based on the results of European Values Study in 2008, Finland had the 8th highest ranking among 47 countries for the acceptance of euthanasia. It is however worth mentioning that the explicit request of a person was not included in the definition of euthanasia in this study.

Attitudes for or against euthanasia are often underpinned by ethical arguments. For example, proponents often claim that a person should have the right to make decisions on their own lives, referring to the respect for autonomy. However, this argument has been criticized to have too little respect for the autonomy of others involved, for example the one of nurses. It has been further argued that respect for autonomy should be neither excessively individualistic, nor have a moral priority over other ethical principles. It should also be kept in mind that with the performance of euthanasia, the concept of autonomy becomes irrelevant for a person, because after death, one is not able to enjoy it.

Euthanasia may be considered to violate the value of life. Therefore, objecting it is commonly justified with the ethical obligation to avoid actions that cause harm. Opponents of euthanasia also refer to its possible misuse and argue that it is better to be safe than sorry in this regard. On the other hand, experiences of suffering or a difficult death of a loved one have been argued to influence individual's attitudes towards euthanasia and the meaning of beneficence in this context. After all, it may and has been questioned whether the interests of a human are served by causing his or her death?

The aim of this doctoral dissertation, which is presented today for public examination, was to reveal and describe the attitudes towards death and euthanasia among the general public and nurses in Finland. Further aim was to explore the factors related to the attitudes and analyse connections between individuals' death- and euthanasia-related attitudes in both target groups. The final aim was to develop an empirical model of factors associated with individuals' attitudes towards euthanasia. Among other things, the presented findings raise the voices of nurses and the general public into the discussion about death and euthanasia in Finland."