

The Attitude of the Orthodox Parishioners Toward Euthanasia: Evidence From Georgia

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Abstract

Background: The right of euthanasia is the subject of worldwide discussion today, as it is one of the most controversial medical, religious, political, or ethical issues. This study aims to survey the attitudes of Orthodox parishioners toward the euthanasia.

Methods: Within the quantitative study, the survey was conducted through a semistructured questionnaire. Respondents were the parishioners of the Orthodox Church. Within the qualitative study, the survey of the experts of the Orthodox Church, in particular the clergy, was conducted. During the survey of the experts, we used the *snowball* method.

Results: The majority of respondents (81%) were aware of euthanasia. The dominant opinion is that euthanasia is “*the consent to life termination during the illness, when there is no way out and recovery is impossible*” or “*a terminally ill person voluntarily decides to end life painlessly*.” Those who disagree with euthanasia rely on the religious factors (why the church prohibits it). Those who agree with euthanasia action argue the legitimate human rights and free will of person. Most of the respondents (86%) have not heard about euthanasia practices in Georgia. Most of the respondents (71%) knew that the Orthodox Church prohibits euthanasia; 39% of the respondents believe that euthanasia is justified in medical terms.

Conclusion: It is advisable to raise public awareness on euthanasia in religious, medical, cultural, social, and legal aspects.

Keywords

attitude toward euthanasia, physician-assisted suicide, ethics, health care, end-of-life care

Introduction

According to Kuhse, the word “*euthanasia*” is derived from two Greek words, *eu*, which means good, and *thanatos*, the literal meaning of which is death.¹ In its literal sense, then, euthanasia means “*good death*.” Euthanasia is the idea of intentional killing by act or omission of a dependent human being for his or her alleged benefit.

There are three types of euthanasia: voluntary, involuntary, and nonvoluntary.² Voluntary euthanasia performed with the patient’s consent. Nonvoluntary euthanasia occurs when the person is unconscious or otherwise unable (e.g., a child or a person of extremely low intelligence) to make a meaningful choice between living and dying, and an appropriate person takes the decision on their behalf. Euthanasia is involuntary when the person killed is capable of consenting to her own death but does not do so.³ Nonvoluntary euthanasia occurs when the person who dies chooses life and is killed anyway. This is usually called murder, but it is possible to imagine cases where the killing would count as being for the benefit of the person who dies.

All three kinds of euthanasia can be either active or passive.⁴ Active euthanasia typically involves a deliberate act,

which results in the patient’s death, for example, use of lethal substances or forces, such as administering a lethal injection.⁵ It is type of euthanasia that we usually refer to as “*mercy killing*.” Passive euthanasia entails the discontinuation of treatment. In other words, doctor or whoever performs the act withdraws (e.g., switching off a machine that is keeping a person alive so that they die of their disease) or withhold (e.g., not carrying out surgery that will extend life for a short time) certain treatment, that could keep the patient alive.⁶ Traditionally, passive euthanasia is thought of as less bad than active euthanasia. But some people think active euthanasia is morally better.

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There are also, so to speak, indirect and assisted euthanasia. Indirect euthanasia means providing treatment (usually to reduce pain) that has the side effect of speeding the patient's death. As the primary intention is not to kill, this is seen by some people (but not all) as morally acceptable. Assisted suicide usually refers to cases where the person who is going to die needs help to kill themselves and asks for it.⁷ Sometimes, this may be scarcely distinguishable from voluntary euthanasia; other times people wanting to die may be physically incapable of killing themselves. If the physician provides the drug which could be used for the same purpose with the patient without actively or passively involved directly by himself, this type of euthanasia is termed as "*physician-assisted euthanasia*."

Euthanasia is legal in the Netherlands, Belgium, Colombia, Luxembourg, Canada, and India; assisted suicide is legal in Switzerland, Germany, South Korea, Japan, and in the U.S. states of Washington, Oregon, Colorado, Hawaii, Vermont, Montana, Washington, DC, and California.⁸

The right of euthanasia is the subject of worldwide discussion today, as it is one of the most controversial medical, religious, political, or ethical issues.⁹⁻¹³ Legislators all around the world try to find a practical solution in order to resolve adequately the question of euthanasia. The line that separates acceptable from impermissible merciful deprivation of life through the centuries has consistently been moved: in the direction of legalization of euthanasia and toward the complete ban of euthanasia. Globally, there are three approaches to euthanasia worldwide. One group of countries equates it with ordinary murder, while the second group represents the view that the euthanasia is privileged murder. Finally, in the third group, euthanasia is decriminalized on fulfillment of prescribed conditions.

In relation to euthanasia, on the one hand, there is a person's freedom, autonomy, the right to dispose the private life, and on the other hand—the right to life, which is considered to be the prerequisite of other human rights. The supporters of legalization of euthanasia believe that the moral obligation of doctors is to end the life of terminally ill patient who is suffering, but they also highlight the strong individual autonomy in the matters of life and death.¹⁴

In the early Greek and Roman traditions, euthanasia was an accepted practice. Change in the acceptance of euthanasia came about through religion, more specifically Judaism and Christianity.¹⁵ The opponents of legalization of euthanasia emphasize the holiness of life.¹⁶ For both Judaism and Christianity, human life is regarded as sanctified, and as such, life should not be destroyed or taken deliberately. For these and other religious traditions, only God has the right to end life.¹⁷ Christianity religion does not sanction suicide. Christians in general are of the opinion that killing be it mercy killing, or self-inflicted killing is against the dominant tenets of Christianity. This is the argument advanced by most religious persons following God's command as prescribed in the 10 commandments, namely, "*Thou shall not kill*." The injunction that "*do not harm*" in the Hippocrates

Oath, which clearly specifies that a physician "*will neither give a deadly drug to anybody*."¹⁸

The Legal Framework of Euthanasia in Georgia

Under the Georgian legislation, euthanasia is a punishable offense. According to the Article 110 of the Criminal Code of Georgia,

killing at the victim's express request and according to his/her true will, committed for the purpose of relieving a dying person from severe physical pain shall be punished by imprisonment for a term of two to five years.¹⁹

According to the Article 24 of the Law of Georgia on the Patient's Rights,

citizens of Georgia may express in advance their will (consent or refusal) in writing about the provision of resuscitation, life support or palliative treatment and/or care if they lose consciousness or become unable to make conscious decisions, if such conditions are caused by: a) the terminal stage of an incurable disease; b) the disease that will inevitably result in a severe disability.²⁰

Therefore, under this law in specific cases, the doctor has the right at the patient's expressed to disconnect him or her from the respiratory unit, to terminate the failed treatment, and to perform other actions that will ultimately result in the patient's death.

Article 24 of the Law of Georgia on the Patient's Rights and Article 110 of the Criminal Code of Georgia contradict each other by content. The Criminal Code of Georgia peremptorily punishes the killing at the victim's request without regard to the circumstances in which the killing occurs. The Law on the Patient's Rights, however, in case of presence of certain conditions allows the killing at the request of the victim. That is, there is a collision between the normative acts.

This study aims to survey the attitudes of Orthodox parishioners and clergy toward the euthanasia. The objective of this study is to understand the respondents' awareness about euthanasia (in the context of sociocultural, legislative, and medical field).

Methods

Within the quantitative study, the survey was conducted through a semistructured questionnaire with a personal interview. The target selection was used within the survey. Fifty respondents participated in the survey. Respondents were the parishioners from one of the Orthodox Church in Tbilisi (Georgia). Participation was voluntary. Of the respondents interviewed, women were 80% and men were 20%. The age of respondents varies from 18 to 60 years. Most of the respondents (40%) were 18 to 25 years old.

Within the qualitative study, the survey of the experts of the Orthodox Church, in particular the clergy, was conducted. During the survey of the experts, we used the *snowball* method. Respondents were selected on the basis of recommendations.

Based on general knowledge within the study, the logical process of discovering new knowledge was possible through a deductive approach. This approach involves the conceptualization and operation of the research topic. The attitude of the Orthodox parishioners is the last step of conceptualization. Conceptualization of the main topic separated in several stages: (a) religion and medicine, (b) Orthodox world and euthanasia, and (c) the attitude of Orthodox parishioners toward euthanasia.

An integral part of the methodology is operationalization, which will then provide a questionnaire. A group of variables have been allocated through the implementation of the operationalization, where we have a combination of variables: awareness; interest and involvement; and expectations, beliefs, and attitudes, hindering factors, and the way to solve the problem.

To comply with the research ethics principles, the questionnaire specified the purpose of the study (who does conduct it and why). The respondents got acquainted with their rights (they could stop to fill out the questionnaire); to avoid misunderstandings, the questions were compiled in a simple and understandable language; the data privacy principle was protected; they were entitled to review the questionnaire filed out by them if they wished.

Ethics

The study was approved by the Ethics Committee of the Ilia State University. The protocol was in accord with the Declaration of Helsinki. An informed consent was taken from each participant. Those participants who did not agree to participate in the study were excluded from the study.

Results

Information about euthanasia had 81% of the respondents. The different answers were recorded to the open question where the respondents were asked to define euthanasia in their own. According to some of them, euthanasia is painless death: *A painless death of a person suffering from terminal illness*. Some of them even added the voluntary patient's wish to the definition: *The act of termination of life of a person man suffering from pain, according to his or her own wish*. Some people added the family's consent to the patient's request. According to one respondent, the euthanasia is *the right to commit suicide* or, in other words, *a legitimate suicide a person requests by himself due to unbearable physical pain or other circumstances*. However, the dominant opinion is that euthanasia is *“the consent to life termination during the illness,*

Table 1. Respondents Should Express Their Attitude Toward Euthanasia.

Totally disagree	Disagree	Neutral	Agree	Fully agree
6 (12%)	6 (12%)	15 (30%)	15 (30%)	8 (16%)

when there is no way out and recovery is impossible” or “a terminally ill person voluntarily decides to end life painlessly.”

Respondents should express their attitude toward euthanasia, for which 5-point scoring system was used (1 = *totally disagree* and 5 = *fully agree*). Almost half of respondents (46%) agreed with euthanasia's act (Table 1).

Then, next question on the reason of their attitude revealed quite diverse, and argumentative answers were revealed. Those who totally disagree mainly produce a religious factor:

I think, life is the gift of the Lord, and no one has the right to interfere with it (we also have no right to hasten own death) but the Lord. Only the Most High has the right to take it away when the time comes. Indeed, in the case of euthanasia, the patient is relieved from suffering and pain, which is really difficult to overcome, but I think that such act is equal to a suicide, which is considered a serious crime both in the religious and moral context. Therefore, I think that euthanasia is particularly unacceptable act for the Orthodox parish.

Those who disagree with euthanasia say, *“I do not agree with euthanasia because nobody has the right to end a life of another person (although there are exceptions when the person's is hopeless and there is no other way to release him from his pains).”*

Those who are neutral have the reason for their attitude:

I am neutral; I neither agree nor disagree to the end. The decision-making on euthanasia depends more on individual situations: if parson's pain is unbearable and death is inevitable, it is better to die without pain and not to endure unbearable suffering and pain, because everyone prefers to die painlessly and calmly than with pain and suffering. It is not acceptable to the end because it is unusual for me as an Orthodox Christian to get involved in this matter and artificially cause the death of another person before it will be natural. It's a bit unacceptable to hasten someone's death. The dying man should make a decision on this.

According to the Orthodoxy, this behavior is unacceptable to me. But for those who are asking for it may be the way out. So neither do I fully agree nor totally disagree.

Those who simply agree with euthanasia have the following arguments:

When people suffer from unbearable pain and are well aware of what they are doing, they have the right to choose painless death. However, it may happen that the pain can be reduced

by a certain dose over time, so many people shall think well before making this decision and shall try other ways out.

The part of the respondents who fully agree with euthanasia produce the following reason for their attitude:

That time, the person undergoes the last stage of the illness, the pains are unbearable and he or she feels unwanted, inactive and for him or her life is senseless. Painful as it is for the relatives, the person is an individual and I think we should respect his or her decision.

That is the right of a human to avoid suffering.

Everyone has the right to choose.

There was a case when it was difficult for a respondent to explain the reason and to fixe own position.

The answer to the next question: Whether you have heard of euthanasia cases in Georgia, the answers were as follows: 86% of the respondents have not heard and 14% have heard about euthanasia practices in Georgia.

However, 71% of the respondents answered the question of whether they believe that the Orthodox Church prohibits euthanasia, that as they think the Church prohibits euthanasia, while 29% did not know the answer to this question.

Regarding the answer to the question, why do you think the Orthodox Church prohibits euthanasia, the opinion of the majority is as follows:

Perhaps because Orthodoxy prohibits the death by a person himself or by someone else. The human death is attributed to the supernatural, sacral thing.

The Orthodoxy prohibits any form of self-injury, cutting arm, and particularly, homicide, because it is considered a sin.

Euthanasia is a suicide.

Most of the respondents (78%) suggest that euthanasia can be justified due to the medical condition, while only 6%—by religion (Table 2).

When asked if the patient has the right to request a painless death if he or she is in the gravest state, the respondents answered as follows: 69% of the respondents believe he or she has such right, 26% could not answer, and 5% said that he or she has no such right.

The next question required the open record of the answer, namely, a respondent should reason the opinions recorded on

the previous question. The respondents who answered that the patients have such reasoned their opinion as follows:

If such a demand is systematic, or is he or she is of the same opinion for some time intervals, it would be better to use euthanasia, because in this case the patient will be aware of his act, and if he or she demands this reasonably, it come that his or her state is very grave. The quietus is better than suffering.

Despite the religion and its dogmas, I think everybody has the right to manage his or her own life.

If a person is not religious, or his belief does not prohibit euthanasia, it is up to him, but it is absolutely unacceptable for Christian beliefs.

In my opinion, no one can feel how painful is his or her condition for a terminally ill person, therefore it is her or his absolute right either to suffer the pain or to give up on this suffering because for him or her the death is better that this unbearable pain.

The respondents who answered that the patients do not have such right justified their opinion as follows:

I think no patient has the right to demand painless death even in the gravest state, because physical pain often leads them to an immoral and unacceptable behavior of Christianity—committing suicide, that is a greater sin than they have thought in this situation.

Most of the respondents (28%) suggest that doctors bear the greatest responsibility for the interference with the patient’s life in the euthanasia practices, while only 16%—family members (Table 3).

Discussion

The analysis of survey showed that the majority of respondents (81%) were aware of euthanasia. Therefore, we can say that the society is informed and has somehow its own opinion on euthanasia. Accordingly, they could be aware of positive and negative consequences of euthanasia. Other studies confirm a similar approach.²¹

Based on the answers to the question what is euthanasia, five aspects were determined: First, when the answer shows that euthanasia is just a painless death for them: “*The painless death of a person suffering from a terminal illness.*” Some respondents also add to this definition the voluntary will of the patient: “*The act of ending life of a person suffering from*

Table 2. How Euthanasia Can Be Justified?

Justified due to the medical condition	Justified legally	Justified socially	Justified by religion	Justified from the cultural aspect
78% (n = 39)	30% (n = 19)	30% (n = 19)	6% (n = 3)	6% (n = 3)

Table 3. Who Bears the Greatest Responsibility for the Interference With the Patient's Life in the Euthanasia Practices?

Doctors	Family members	The state	The court	The Church	The society	Others
28% (n = 14)	28% (n = 14)	16% (n = 8)	8% (n = 4)	6% (n = 3)	6% (n = 3)	8% (n = 4)

pain, according to his or her will." Some respondents together with the patient's request rely on the family's consent. There was also an answer that the euthanasia is "to obtain the right to commit suicide" or otherwise "a legitimate suicide, which the person requests himself due to the unbearable physical pain or other circumstances."

However, dominant is the idea that euthanasia is "the consent to life termination when there is no way out and recovery is impossible," or "a person suffering from terminal illness decides by own will to end his or her life painlessly."

The attitude of almost most of the respondents is neutral, or they simply agree with euthanasia. However, when they are faced with the fact (subsequent questions) their consent fixed in this question becomes controversial. They try to justify or not justify the euthanasia practice for various reasons. What is the reason for their attitudes? We have revealed quite diverse and reasoned answers thereof.

Those who totally disagree with euthanasia mainly rely on the religious factor. Those who simply disagree with euthanasia say that: "I do not agree with euthanasia because nobody has the right deprive life of other people."

Those who have neutral attitude, name the following reason for such: "This behavior is not acceptable to me because of Orthodoxy. But for those who are asking for it euthanasia may be an ease. So I neither fully agree nor totally disagree."

Those who simply agree have the following opinion:

When a person is suffering from unbearable pain and is well aware of what he does, he or she has the right to choose a painless death, but it may happen that a reduction in pain by a certain dose may last over time, so before making such decision a person shall think a lot and try other alternatives.

The part of the respondents who fully agree with euthanasia reason their attitude as follows:

That time, the person undergoes the last stage of the illness, the pains are unbearable and he or she feels unwanted, inactive and for him or her life is senseless. Painful as it is for the relatives, the person is an individual and I think we should respect his or her decision.

From the answers, we can clearly see that those who disagree with euthanasia rely on the religious factors (why the church prohibits it and so on) that include also respondents with neutral attitude and those who agree with euthanasia act bring legitimate human rights and personal freedom as arguments.

Based on the results, most of the respondents (86%) have not heard about euthanasia practices in Georgia.

Therefore, it can be said that as the Orthodox Church prohibits such act, so euthanasia is not often performed in Georgia, and if it is, that is such a taboo that it is prohibited to disseminate such information in the society. Moreover, the Church and the clergy are dominant actors in the Georgian Orthodox space.

Almost most of the respondents (71%) knew that the Orthodox Church prohibits euthanasia. The majority reasoned it by the fact that it is a suicide or a sin that is punished by religion.

Thirty-nine percent of the respondents believe that euthanasia is justified in medical terms. This indicates that the Orthodox Christians believe the doctors and medical institutions are the factors in frames of which the euthanasia can be fairly justified. Other studies confirm a similar approach.²²

Sixty-nine percent of the respondents think that the patient, who is in the gravest state, may request painless death. This contradicts their opinions (as Orthodox believers who deny the euthanasia on the background of all kinds of suffering because religion prohibits). Sixty-nine percent are those people who did not justify euthanasia on previous questions. The people who have admitted the right of euthanasia bring the arguments of human rights and religion (if the religion does not prohibit euthanasia). Those who have denied such right believe that it is unacceptable for their faith, it is a sin.

The findings are interesting from the aspect that bears the greatest responsibility for the interference with the patient's life during euthanasia practice. The Orthodox parishioners attached equal responsibility to doctors as well as family members and then the state. The results of this question can be related to the results of the question where it was discussed in which areas the euthanasia is justified. In this case, the respondents mainly justified this act in medical terms. In these results, doctors are granted the more responsibility and more trust. What about family members, it is probably because the family is a strong social institution in Georgia. Many of us often follow the advice of family members when it comes to life-threatening action.

In the end, the part of the respondents who when criticizing euthanasia brought the sin and the Orthodox rules as arguments agreed to the euthanasia act when they were faced with the fact. However, due to the lack of interviewed Orthodox parishioners, it is difficult to find any conclusions and to consider the survey as representative. However, the research was still held, and the reality showed us somehow the reality. Attitudes and actions of the Georgian Orthodox parish toward the euthanasia were revealed.

Conclusions

Euthanasia is viewed differently by different people: for some, it is about autonomy, while others see it as murder. From the answers, we can clearly see that those who disagree with euthanasia rely on the religious factors that include also respondents with neutral attitude and those who agree with euthanasia act bring legitimate human rights and personal freedom as arguments. The attitude of almost most of the respondents is neutral, or they simply agree with euthanasia. However, when they are faced with the fact their consent fixed in this question becomes controversial.

It is advisable to raise public awareness on euthanasia in religious, medical, cultural, social, and legal aspects. It will make it easier for people to learn moral, ethical, or religious values. It is desirable to carry out more of such research; to make own opinion more clear and reasonable; and to respect the opinion, religious, political, or ethnic identity of others.

It is desirable to find solutions to euthanasia and existing problems. It is necessary to develop a plan of united activity through which the euthanasia is treated as religious, social, cultural, medical, and ethnic. This will help people to get a comprehensive knowledge toward the particular issue and to understand and get acquainted with the religious rules and traditions of people of other nationalities and ethnic origins.

It is also necessary that the clergy provides information to the people correctly and objectively. People are often led by people with a subjective view of the superstition or the clergy. The question of how euthanasia is needs the objective and logical approach to thinking. It is recommended to examine the euthanasia and related issues in the school period, and most importantly, the teachers should provide this information correctly and deliberately for the pupils.

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