

Declaration on **Assisted Suicide and Euthanasia**

Virtual Conference, 2021

We, young people from diverse ethnic, religious, cultural, economic, political and social backgrounds from different regions of the world, affirm that each person possesses intrinsic and inalienable human dignity, from conception until natural death and is always to be viewed as an end and never solely as a means. Human dignity is the foundation for every human right, it is not granted by the state or society, and it can never be taken away.

Upholding human dignity means providing support for those who are ill and suffering. We affirm our commitment to extending true compassion and solidarity in contributing to the aid of the patient who is in pain and distress. Practicing compassion and solidarity in medicine involves offering the best medical care available and providing company and comfort when patients are vulnerable. Assisted suicide and euthanasia do not represent a solution for the suffering patient, since they only provide those suffering with the means to end their life. Compassion means “to suffer with”, therefore the solution is to alleviate their pain and suffering.

We condemn assisted suicide and euthanasia and the promotion of either as violations of the inherent dignity of the person. No matter the form in which they take place and the different legal definitions associated with them, they have the intent to cause or hasten the patient’s death, which makes these practices unacceptable under any circumstances. This is what differentiates them from any other type of medical practice and why they should never be confused with palliative care, which seeks to mitigate pain and suffering.

Although assisted suicide and euthanasia are often described as “death with dignity”, no person can lose their dignity due to their condition, age or suffering. Such terminology implies that there is something dignified about a particular method of bringing about death, but persons retain their dignity as long as they live, and thus all die with dignity, no matter their condition or circumstances of death. No international body recognizes the so-called “right to die” nor is it a part of the international legal framework.

Assisted suicide and euthanasia necessarily require the involvement of medical professionals. When assisting suicide, these professionals prescribe and provide the lethal substance for the patients to administer themselves. In the case of euthanasia, they administer it directly or withdraw needed care. Both practices distort the doctor-patient relationship and violate the basic principles of the medical profession, the essential goal of which is the promotion and restoration of health. Not bringing harm upon the patient is the cornerstone of medical ethics, and a duty explicitly mentioned in the Hippocratic Oath, as well as in its

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modern version, the Declaration of Geneva. In societies where euthanasia or assisted suicide is practiced, no medical professional should ever be coerced or forced to participate, since to do so violates their oath and the fundamental right to freedom of conscience.

Studies indicate that patients who express the desire to undergo these procedures often admit that they do not, in fact, wish to end their lives. Many do so out of fear of pain and other remedial factors. It is now almost always possible to reduce the amount of pain and suffering the patient experiences, even in cases of terminal illness. We call upon medical professionals to maximize their efforts in providing adequate pain management. It is also necessary to recognize and treat symptoms of psychological conditions, including depression, that often accompany other illnesses and lead the patient to express the desire for suicide or death. Medical approaches that cherish the patient's dignity such as holistic palliative care offer effective treatments and have been proven to lead to a significant reduction in the number of patients requesting assisted suicide.

Legalizing assisted suicide or euthanasia increases the risk of persons being viewed as burdens especially those who are vulnerable due to their age, disability, or sickness. We stand together with all human rights defenders who advocate on behalf of persons with disabilities or those who are ill. The experience of countries that have legalized these practices has shown that the initial restrictions are quickly eased, and assisted suicide and euthanasia are very soon offered not only to people suffering from terminal illness, but also to people with disabilities, psychological disorders, the elderly, and even to children. No person should ever be viewed as a financial burden or as though they are disposable to society because he or she requires medical, physical, or psycho-social support or care. Every person contributes to society by virtue of his or her existence.

Therefore, we call upon the members of the medical profession, jurists, political decision makers, ethicists and all stakeholders at the local, national, regional and international levels as well as society in general to stand up for human dignity at all stages of life. We invite them to show true solidarity for those who are vulnerable by fully rejecting the practices of euthanasia and assisted suicide and to promote end of life care that respects human dignity, such as palliative care and psychosocial support.