Religious Groups’ Views on End-of-Life Issues

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In the following summaries, religious leaders, scholars and ethicists from 16 major American religious groups explain how their faith traditions' teachings address physician-assisted suicide, euthanasia and other end-of-life questions. (For an in-depth look at public opinion on end-of-life issues, see “TK.” And for an overview of the political, legal and ethical dimensions of the end-of-life debate, see “TK.”)

Assemblies of God

The Assemblies of God, the largest Pentecostal denomination in the United States, opposes physician-assisted suicide and euthanasia. The denomination teaches that life is a sacred gift and that only God should determine when life ends. “We simply feel that it is not our prerogative to end life,” says Edgar R. Lee, chairman of the church’s Commission on Doctrinal Purity. “God is the giver of life, not us.”

At the same time, the church allows that life need not be sustained at all costs when there is no hope for recovery. “We leave room for people to [reject] artificial means of life support,” Lee says. Indeed, he adds, the church “does not frown on” the use of pain medication to alleviate suffering, “even in cases where it might contribute to hastening death.”

For more information:


Buddhism

According to Damien Keown, emeritus professor of Buddhist ethics at Goldsmiths College, University of London, Buddhists generally oppose assisted suicide and euthanasia. Buddhism teaches that it is morally wrong to destroy human life, including one’s own, he says, even if the intention is to end suffering. Buddhists are taught to have a great respect for life, Keown says, even if that life is not being lived in optimal physical and mental health.

However, he says, Buddhists also believe that life need not be preserved at all costs and that one does not need to go to extraordinary lengths to preserve a dying person’s life. This means, for instance, that while a terminally ill person should not be denied basic care, he or she could
refuse treatment that might prove to be futile or unduly burdensome. “The bottom line is that so long as there is no intention to take life, no moral problem arises,” Keown says.

For more information:


Catholicism

The Roman Catholic Church strongly opposes physician-assisted suicide and euthanasia. The church teaches that life should not be prematurely shortened because it is a gift from God, says John A. Di Camillo, staff ethicist at the National Catholic Bioethics Center in Philadelphia, Pa. “We don’t have the authority to take into our hands when life will end,” he says. “That’s the Creator’s decision.”

Catholic thinkers like Di Camillo contend that the decision to take one’s own life often comes as a result of issues like poor pain management, despair and loneliness, or the feeling of being a burden on family and others. These conditions, he believes, can be addressed with better palliative and psychological care. “We don’t give enough attention to people near the end of life because we’re afraid of the end of life and don’t want to come to grips with it,” Di Camillo says.

At the same time, the church recognizes that a dying person has the moral option to refuse extraordinary treatments that only minimally prolong life. “The predominant distinction or criteria for legitimate refusal of treatment is whether the treatment in question is considered proportionate or disproportionate,” Di Camillo says. This means patients can legitimately forgo “treatment that doesn’t give a reasonable hope of physical or spiritual benefit, such as resuscitating someone who is at the very end of life,” he says.

For more information:


Church of Jesus Christ of Latter-day Saints (Mormon Church)

The Church of Jesus Christ of Latter-day Saints opposes physician-assisted suicide and euthanasia, believing that taking one’s own life or the life of another violates God’s commandments and his plan for each person. “While acknowledging the suffering experienced by many, we firmly believe in the sanctity of human life and in its role in God’s plan,” says Lyman Kirkland, a spokesman in the church’s public affairs department.

However, the church teaches that when someone is dying, it is acceptable to forgo excessive or extraordinary therapies. “The church does not believe that allowing a person to die from natural causes” – removing a patient from artificial life support, for example – “falls within the definition of euthanasia,” Kirkland says, adding that “families should not feel obligated to extend life by unreasonable means.”

For more information:

The Church of Jesus Christ of Latter-day Saints. “Euthanasia and Prolonging Life.”

Evangelical Lutheran Church in America

The Evangelical Lutheran Church in America (ELCA) opposes physician-assisted suicide and other efforts by medical professionals to speed a patient’s death. Destroying life created in God’s image is contrary to core church teachings, says the Rev. Roger Willer, the ELCA’s director of theological ethics. “Life is a gift from God, to be received with thanksgiving, and there is an integrity of the life process that should be respected,” he says.

At the same time, Willer says, the church teaches that there is no requirement to take extraordinary steps to keep a dying person alive a little longer. “Allowing something to happen is different than actively hastening death,” Willer says.

For more information:

Episcopal Church

In 1991, the Episcopal Church passed a resolution against assisted suicide and other forms of active euthanasia, stating that it is “morally wrong and unacceptable to take a human life in order to relieve the suffering caused by incurable illness.” According to Timothy Sedgwick, a professor of Christian ethics at Virginia Theological Seminary, this teaching comes from the church’s broader view “that one should never take a life, even your own.” At the same time, Sedgwick says, there is a sense within the church that hard-and-fast rules on end-of-life issues may not fit every circumstance. “Although we have a clear moral norm against the taking of human life, there may be cases that stand beyond judgment,” he says.

The church also teaches that it is justified to stop medical treatment, including artificial nutrition and hydration, when that treatment brings significantly more burdens than benefits to a person. Such decisions also should be informed by the moral norm against taking life, Sedgwick says. “The dividing line here is the difference between the intent to take life and withdraw[ing] treatment.”

For more information:


Hinduism

While there is no formal Hindu teaching on assisted suicide or euthanasia, there is a general concern in Hinduism that prematurely ending a person’s life could negatively impact their karma, says Deepak Sarma, a professor of South Asian religions and philosophy at Case Western Reserve University in Cleveland. The concept of karma centers around the belief that good and bad occurrences in one’s life are caused by actions taken in past lives, since Hindus believe in reincarnation. “We believe that whatever suffering you experience now is because of something you did in the past,” Sarma says. “So if you circumvent karma by taking some action to stop suffering, you will pay for it later.” In fact, Sarma says, the act of delaying suffering may further increase bad karma in the next life.

At the same time, some Hindus believe there are circumstances that could justify a hastening of death. “There are some who believe that if you have reached a stage in your life when you can no longer worship properly [due to illness or infirmity], then you are justified in asking
your doctor to hasten your death,” Sarma says. Most Hindus, however, would probably not subscribe to this view, he says.

For more information:

BBC. 2009. “Euthanasia, assisted dying, and suicide.”

Nimbalkar, N. “Euthanasia: The Hindu Perspective.” (PDF)

Islam

Islamic teachings oppose physician-assisted suicide and euthanasia. “Muslims believe that life is sacred and comes from God; therefore it is a sin to take life,” says David Stephen Powers, a professor of Near Eastern studies at Cornell University in Ithaca, N.Y.

Islam also teaches that God alone decides how long someone will live and when they will die, according to Ayman Shabana, a visiting fellow at the Islamic Legal Studies Program at Harvard Law School in Cambridge, Mass. “There is this reluctance ... to make any kind of decisions that would end life prematurely because it is believed that [these decisions] are solely in the hands of God,” Shabana says.

Islam’s views on such issues as assisted suicide and euthanasia also are influenced by the belief that suffering and other difficulties might be beneficial, Shabana says. “There is this notion that you don’t always know what’s good for you,” he says, “so it may be right that you should go through some kind of difficulty that tests your faith.” Indeed, Shabana says, “in the Islamic tradition, end-of-life suffering is seen as a way to purify previous sins so that by the time you meet God, you do so in a [more pure] state.”

While Islamic thinkers oppose hastening death, they also generally believe that the terminally ill need not employ extraordinary means and technologies to delay dying. “We are basically talking about the difference between a conscious decision to end life, which is wrong, and life ending by itself,” Shabana says, adding that the line between the two is not always clearly defined.

For more information:

**Judaism**

Under Jewish law, the directive to preserve human life generally outweighs other considerations, including the desire to alleviate pain and suffering. According to Rabbi Leonard A. Sharzer, associate director for bioethics at the Louis Finkelstein Institute for Religious and Social Studies at The Jewish Theological Seminary in New York City, Judaism teaches that life is a precious gift from God. A person’s life belongs to God, he says, and therefore deciding when it ends should be left to God.

All three major Jewish movements in the United States – Orthodox, Conservative and Reform – prohibit suicide and assisted suicide, even in cases of painful, terminal illnesses. “There are some minority views – that suicide might be permissible in rare, certain circumstances – but the majority view among all [movements] is that it’s not permissible to take one’s own life under any circumstances,” says Sharzer.

At the same time, Sharzer says, Jewish teachings do allow a person to forgo medical treatment if that person’s life is about to end and if he or she is suffering. “Jewish thinkers are pretty united in believing that a person who is near the end of [life] can stop treatment,” he says. “If that treatment is just going to give another month or two of life, and if that time is just going to bring more suffering, most Jewish rabbis and philosophers would say no one is required to endure that.”

According to Jewish teachings, doctors and caregivers should not do anything to hasten death and generally must work to keep people alive as long as possible. However, Sharzer says, in dire cases “there is a distinction made between active and passive euthanasia, between killing and allowing to die.” So, for example, most Jewish religious and ethical thinkers would agree that Judaism would allow for the cessation of life-prolonging treatment in the case of a dying person who is in a coma or vegetative state, he says.

*For more information:*


**National Baptist Convention**

The National Baptist Convention, the largest historically black Protestant denomination in the United States, does not have a specific teaching on physician-assisted suicide or euthanasia. “This isn’t an issue that we’ve considered,” says Charles Brown, a professor of Christian ethics at Payne Theological Seminary in Wilberforce, Ohio. However, he says, broader church teachings are in opposition to practices such as suicide and euthanasia because they prematurely end life. “Within the traditional teachings of our church – and black churches in general – there is this notion that the length of one’s life is the providence of God, and you let it take its course,” he says.

At the same time, Brown adds, there is no requirement that patients near the end of their lives continue treatment just to extend life a little longer. “I’ve had people in my congregation who have made that choice [to forgo treatment], and I didn’t offer biblical warrants against that,” says Brown, who previously served as a senior pastor at several National Baptist churches.

*For more information:*

The National Baptist Convention, USA, Inc. “What We Believe: Articles of Faith.”

**Presbyterian Church U.S.A.**

The Presbyterian Church U.S.A. has examined theological questions related to end-of-life issues, but the denomination has not taken specific positions or provided guidance on assisted suicide or euthanasia. However, broader church teachings – including a belief in the intrinsic value of human life, the sovereignty of God and the need for health care workers to do no harm – would imply opposition to assisted suicide and active euthanasia or hastening death, according to Abigail Rian Evans, a Presbyterian minister and bioethicist. While Presbyterians “don’t categorically rule out euthanasia and physician-assisted suicide, the burden of proof rests with the person taking the position in favor of these things,” Evans says.

According to Evans, a senior scholar at the Edmund D. Pellegrino Center for Clinical Bioethics and an adjunct professor in the Department of Family Medicine at Georgetown University Medical Center, refusal or withdrawal of treatment in cases involving a terminally ill patient would be viewed as more acceptable by her church. Forgoing treatment in such cases is different from assisted suicide or active euthanasia, she says, “because it is the illness, rather than the withdrawal of treatment, that is ending life.”
For more information:

Presbyterian Church U.S.A. 1995. “In Life and In Death We Belong to God: Euthanasia, Assisted Suicide and End-of-Life Issues.” (PDF)

Seventh-day Adventist Church

In 1992, the Seventh-day Adventist Church issued a statement opposing euthanasia and assisted suicide. This opposition is rooted partly in the Adventist belief that the physical body and the soul are permanently linked and that both will be resurrected after death, according to Roy Branson, associate dean of the School of Religion at Loma Linda University, an Adventist institution in Loma Linda, Calif. “We believe that there will be a bodily resurrection in the near future, and that heightens our value of each human life.” He adds, “Like many traditions, we put great value on life because life is a gift of God.”

At the same time, Branson says, the church does not believe “everything possible” must be done to keep someone alive, “particularly when the dying patient doesn’t want to be alive” or is in severe pain. For example, the church’s position statement on care for the dying states that patients are not obligated “to accept medical interventions whose burdens outweigh the probable benefits.”

For more information:


Southern Baptist Convention

The Southern Baptist Convention, the nation’s largest Protestant denomination, has issued a number of resolutions on physician-assisted suicide, euthanasia and related topics. The resolutions are not calls to action but rather “expression[s] of opinion or concern,” according to the denomination’s website. The church believes that because life is created by God, it is sacred from conception until natural death and that suicide is self-murder, says C. Ben Mitchell, a professor of moral philosophy at SBC-affiliated Union University in Jackson, Tenn. “We believe that [physician-assisted suicide] is a usurpation of God’s prerogative because he is our creator and sustainer,” Mitchell says. As an alternative, a dying person’s doctors, family
and community have a duty to alleviate factors such as physical pain and psychological despair that often drive people to consider taking their own lives, he says.

At the same time, Mitchell says, the church recognizes that there is “an appropriate time to stop” medical treatments. Although the SBC generally opposes any action that may hasten death – including stopping regular medical treatment and the cessation of food and water – medical treatments that prolong the dying process are not obligatory. For instance, Mitchell says, an older person who is dying of kidney failure, is not a candidate for a transplant and has been reacting very badly to dialysis treatments should have the option to cease treatment. He asks: “Must that person continue dialysis despite its ravaging effects on their body? No, not in my view and not in the view of most Southern Baptists I know.”

For more information:


Southern Baptist Convention. 1996. “Resolution on Assisted Suicide.”

United Church of Christ

The United Church of Christ supports the right of terminally ill patients to make their own decisions about when to die – including whether to hasten death. This position is in keeping with broader church teachings that stress the importance of respecting individual conscience and choice, according to the Rev. Timothy Tutt, a senior minister at Westmoreland Congregational United Church of Christ in Bethesda, Md. “We believe that each of us approaches God on our own terms, and this includes at the end of our lives,” he says.

According to Tutt, the church also supports the right of families to discontinue treatment for incapacitated loved ones who are near death or in a vegetative state. “Once again, this is a decision of conscience,” he says, adding that families should base their decisions on what their minds and hearts tell them is best for their loved ones. Says Tutt: “We encourage people to ask: Am I being a wise or unwise steward of my parent’s life by keeping her alive to the very end?”

For more information:

**Unitarian Universalist Association**

In 1988, the Unitarian Universalist Association of Congregations (UUA) passed a resolution advocating “the right to self-determination in dying.” As a result, the church supports laws such as those in Oregon and Vermont that enable terminally ill patients, under carefully defined circumstances, to seek physician assistance in hastening their own death, says Gary Kowalski, interim minister at the Community Church of Chapel Hill in North Carolina. Unitarian Universalists also support the right of a legally designated proxy to make life-and-death decisions for a patient, including withdrawal of life support, in cases in which the patient is unable to make such choices.

The UUA position on end-of-life issues is grounded in the church’s teachings on the individual. “Ours is a faith that honors the sanctity and integrity of the individual conscience,” Kowalski says. “These ultimate questions of life and death belong with the person most intimately affected, not with the church, a legislative committee or a bureaucratic panel.”

*For more information:*


**United Methodist Church**

The United Methodist Church opposes physician-assisted suicide. The denomination teaches that “dying well” is an integral part of Christian life, says James Thobaben, a professor of bioethics and social ethics at the Asbury Theological Seminary in Wilmore, Ky. “We believe that in dying, we must do the best we can to proclaim Christ’s glory,” according to Thobaben. With this in mind, he says, it is important for Methodists to show their family, friends and others that they remain believing and committed Christians even if they are suffering “on the deathbed.” Trying “to control death in a late, modern, hyper-individualistic way, or [being] afraid of pain” is contrary to what the church considers its great tradition, Thobaben says.

The church also opposes euthanasia, although there is no requirement that the terminally ill avail themselves of every possible treatment as long as their actions are not intended to hasten death. “There is a difference between not needlessly extending the dying process and accelerating it,” Thobaben says.

*For more information:*
The United Methodist Church. 2004. The Book of Discipline of The United Methodist Church. “Suicide.”