

# Essay question 1

**The sanctity of life is central to end of life care decisions. To what extent do you agree? (30)**

The sanctity of life is the belief around life being sacred. I do believe that the sanctity of life is central to end of life care as patients will make their decisions based on their belief around it.

The sanctity of life is the idea that life is so sacred that we should not interfere with life, whether that be choosing to die, or making ourselves ill or just not caring about the life that we have been given. The sanctity of life is a large part of the Christian belief and Christians believe that since God has gifted us our sacred life, we should be careful and not interfere with the life he has chosen for us. The Roman Catholic Church believe that life is a sacred gift from God and that we should cherish it. This means that we are to do the best we can for God, because he chose to give us this life and this universe. A strength of this belief is that because Christians feel as if they should live by thanking God, they will have heaven to look forward to, to be able to reside with him when they die. A weakness of this belief is that because they are living by what they think God wants from them, they might not actually be living life to the fullest and enjoying it the way that they could. Another weakness of living the way you think God wants you to mean that Christians might not be using the freewill they also received as a gift from God.

Utilitarian Peter Singer believes that life is not sacred and that we have full autonomy to do whatever we want to do in the life that we have. This means that Singer believes we should be living the way we want to rather than living how we think we should be living. A strength of this belief from Singer is that it means people can live the way they want rather than almost living by laws, this way it could allow Christians to live with the freewill God gave them rather than potentially not using it. Palliative Care is a form of end-of-life care. Palliative care is used for the sick and elderly with a terminal illness when a cure is no longer possible, and the patient is likely to pass away in the coming six months. Marie Curie believes that 'palliative care should be widely available to all'. This shows that it is a good type of care to use if the sick and or elderly, are suffering badly.

Palliative care allows patients to enjoy their last months of living without having to suffer alone.

Palliative care allows patients to be with their families and be able to look back on the happy times in life without having as much pain as previous times. Palliative care is used to make their life easier all while providing nursing, pain relief and company to the patient. A strength of palliative care is that it allows family to come to terms with the death in the near future and allow them to spend as much time as they want with the patients in hopes to reflect the life they have lived. The sanctity of life is important while choosing palliative care because it allows patients to reflect on life whilst they almost reach the end, without going against their potential belief of life being sacred. A Christian would believe that palliative care is a good and respectful way to die as they believe that it does not

go against God in any way, and is not undermining the life that God gave them, as they are living till they die rather than choosing to end their life early. A strength of this is that it might help the patient be at ease knowing that they will reside with God in heaven and see their loved ones that they lost in the past. A weakness of living by the Christian belief is that it means that the patient is still going to be suffering even when there are other options available, but perhaps this consequence isn't as impactful as being able to reside with God calmly. A Utilitarian response to Palliative Care would be the belief of whatever creates the greatest happiness for the greatest number. Meaning that if choosing palliative care is not only the best option for the patient but also the patient's family, then it would be the best option. But if it meant that the larger family would suffer greatly, then perhaps choosing something else would be better off for all of them. A strength of this belief is that it allows everyone to be happy, rather than have some suffer. It will make it easier for both the patient and the family if one or the other isn't suffering. In relation to the question the sanctity of life is central to end of life decisions as making tough decisions are difficult to carry through morally and physically so perhaps by living with your beliefs as a priority, it will make all decisions easier to do.

Another type of End of Life Care is Dignitas. Dignitas is a Swiss organisation where people can choose to end their lives, if they have an incurable or terminal illness causing them to suffer significantly. Before even being considered at Dignitas, the patient has to go through a multitude of steps to be eligible for the service. At the beginning of the process, it is noted that the patient must be able to take their last action themselves, meaning that they cannot expect the doctor to do the killing, they must do it themselves. The patient is required to write two letters of request, two weeks apart, then go through testing and doctor's appointments to make sure that this is the decision they want to make to end their life. After this is done, the patient would be given two different pills to take separately, at the Dignitas Housing, to end their life with their loved ones. The patient's belief around the sanctity of life is crucial during the decision making, the patients regardless of religion, may feel that they cannot deal with the suffering for much longer and choose that it is the right decision to end their life themselves. A strength of Dignitas being an option is that it stops the patient suffering, not only for them but also stops the family of the patient have to see them continuously suffer. A downside of Dignitas is that it might not be what the family want for the patient, but at the end it is the patient choice and they should hope that their family forgive them for ending their suffering. The Roman Catholic Church completely oppose the idea of Dignitas and choosing to die as they live by the bible verse, 'there is a time for everything, a time to be born and a time to die'. By this they mean that God has a plan for everyone and they do not believe that anyone should interfere with Gods Plan, because he gave us the gift of life. A strength of this belief is that a patient

knowing this, may decide to wait for Gods decision rather than taking their own life, which could mean that the patient could perhaps try to enjoy their time left on earth, rather than make an abrupt end to it. A weakness of this belief is that if they think about God whilst making the decision, they might ask themselves why they should change their decision because God has let them suffer, in ways they cannot cope with. Another religious response to Dignitas is the Christian belief that 'thou shall not kill', meaning that as it says in the bible, we are not supposed to kill, not only one another but also ourselves, as we would be ending the gift of God early, and we shouldn't do that. A strength of this response is it perhaps reminds patients of their morals and remind them that perhaps choosing to die, it not the right choice. A utilitarian response to Dignitas is from Peter Singer. Singer believes that life is not sacred and that we should have full autonomy of or lives and bodies and to live how we want.

This means that he believes we have the right to choose whether to live or die, and nobody should be inflicting our decision. A strength of this is that it can help patients make an informed decision without being inflicted on thoughts and beliefs, and rather just focus on themselves and what is best for them. In relation to the question, the belief of the sanctity of life is seriously crucial to end of life decisions as it impacts the patients in both positive and negative ways.

In conclusion, the sanctity of life is central to making end of life decisions because not only does it affect the patient, but also their families. In some cases, the families belief on the sanctity of life may inflict the patients decision more than their own belief around it, which can be both good and bad. Good in a way as they would be reducing the mental strain on the family, by perhaps choosing on behalf of what is best for them, but bad in a way that it may make it significantly harder for the patient to make the decisions in fear of offending their family.