WINNING ENTRY IN THE ENGL 115 CATEGORY FOR 2019-2020

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Seeing Myself Out: Dying by Choice over Affliction

After serious thought, I have decided that in the event of a debilitating illness, I would choose physician-assisted suicide (PAS) as my primary option. I realize that you, Mom and Dad, may be appalled and absolutely against this decision. You always talked about how life is a gift, how an individual should never “play God,” and how dying from natural causes is the best way to leave this world. I respect your opinions, but the aftermath of medical malpractice has left me living in chronic pain and fearing for the worst. I believe I have the right to be medically assisted in dying. I had no choice as to how I arrived in this world, but I should have a choice as to how I depart. You have shown me love throughout my life, taught me to be the best version of myself, and to make informed decisions as an adult. I am not trying to raise fear with you, but it has been difficult for me to bring up my thoughts and feelings. With this in mind, I have researched my right to autonomy. I believe my body is mine and mine alone; therefore, I have the right to choose PAS as my primary option. I also considered your fears about euthanasia and religion. Although religion is important to you both, I find it irrelevant; therefore, it will not influence my decision. Ethics was another main concern to me, and I wanted to ensure that this decision was ethical. I also want you to consider the potential consequences of my being withheld from this choice. I have done careful research to ensure this decision would be right for me, as I have
experienced the perils of pain and would not want to live out the rest of my life with it. I hope by the end of this essay you will understand and respect my choice.

The right to autonomy was the first thought that came into my mind when researching PAS. You both may believe that since you created me, you have a say over what I do to my body. The thought of your child becoming an adult and making life-altering decisions may be frightening; rest assured, it is also new and scary for me. I was afraid that my right to autonomy would be overlooked, but the Canadian Supreme Court stated that an “individual’s response to [an]...irremediable medical condition is...critical to their dignity and autonomy” (Chochinov, 2016, p. 253). Forbidding my decision would be stripping me of my bodily integrity as determined by the Supreme Court. After undergoing surgery and ending up in chronic pain, I was prescribed painkillers and antibiotics by doctors who brushed me off because when I voiced my concerns. This situation led to losing the ability to make decisions for myself to my parents who decided which treatments I should or should not go through. I followed and accepted whatever everyone else thought was best for me with a smile, but deep down I was suffering inside. PAS is legal for a “competent adult person” who has “clearly consent[ed] to the termination of life” and “has [an] irremediable medical condition...that causes enduring suffering” (Chochinov, 2016, p. 253). Now that I am an adult, I firmly believe that my body is mine; therefore, I will no longer abide others making decisions about it. This control over my own body includes my decision to die by medical assistance in the case of a life-debilitating illness.

Although I am no longer religious, I also considered your worries about euthanasia and religion. The Bible states in Job 14:5 (New International Version) that “[a] person’s days are determined” by God and the church believes that God is the ruler over life and controller of
death. You both believe that God is the ruler; however, I do not. What kind of God would inflict the amount of suffering I went through and continue to face? I do not believe in Heaven or Hell, but you seem to have a fear of where I may end up going. You may worry that I would be going to Hell if I chose PAS as my method of death and that we may never reunite in this supposed “afterlife” in Heaven. I began to do some research about religion and euthanasia, and a study surprisingly found that “stronger religious belief was associated with more positive support for euthanasia” (Hains & Hulbert-Williams, 2013, p. 715). The shift in belief into the positive attitude towards euthanasia shows the progressing beliefs of more religious people.

Perhaps you are more of a traditionalist and you believe in miracles. You believe that if I were to become irremediably ill, I could miraculously be healed by the Lord if I were just to wait, pray, and have others pray for me. Research shows that the idea of miracles was mainly associated with the alleviation of terminal medical diagnoses. Many religious people believe that miracles are “possible” and that they are more likely to reject treatments such as euthanasia to hasten death (Sharp, 2017, p. 212). I do not believe in miracles, Mom and Dad. The church has taught me nothing but fear: the fear of going to Hell, the fear of God’s wrath, the fear of how other Christians will perceive me, the fear of being “unholy,” and the fear of being “unworthy” of God’s love. Religion is a personal choice and should not be the reason for restriction against my decision. Prolonging pain and suffering because of fear behind the church is not what I want to go through, and I hope you both will understand where I am coming from.

I also had concerns about the ethics of PAS, as I felt assisted suicide straddled a line between ethical and unethical. The slippery slope argument is popular; that is, if voluntary euthanasia is accepted, it could lead to justifying involuntary and non-voluntary euthanasia. Involuntary euthanasia occurs when the patient is not consulted, is unable to form a judgement,
or opposes the physician's plan; similarly, non-voluntary is that the patient is incompetent to properly accept or reject a plan. Steven Daskal (2018) claims that voluntary euthanasia “requires two things: a patient’s autonomous request, and a physician’s...judgement” (p. 27). Daskal notes an issue with the slippery slope argument: "all cases of non-voluntary euthanasia...lack the autonomous request from the patient, and so the conditions...to justify voluntary euthanasia can never...be present in cases of non-voluntary euthanasia" (p. 27). I am startled by the argument that legalizing PAS will result in involuntary and non-voluntary euthanasia. Involuntary and non-voluntary is non-consensual, and Materstvedt et al. from the EAPC Ethics Task Force (2003) explained that “medicalized killing of a person without the person’s consent whether non-voluntary...or involuntary...is not euthanasia: it is murder” (p. 98). I do not condone murder.

After legalization of PAS by the Parliament of Canada, Canadian adults—who are eligible—are able to apply, and the act of euthanasia is no longer considered murder (Government of Canada, 2019). To be eligible for PAS, five requirements must be met. An individual must be eligible for health services that are funded by either the federal government, provincial, or territory; they also must be 18 years old and mentally competent; they must have an irremediable medical condition; they must make a voluntary request for PAS that is not from outside pressure or influence; and they must give informed consent to receive (Government of Canada, 2019). The criteria for eligibility along with the reassurance from both Daskal and Materstvedt et al. eased my worries about the ethics behind PAS by distinguishing the differences of voluntary euthanasia, the legal assisted suicide, and involuntary or non-voluntary euthanasia, which is otherwise known as homicide.

Potential consequences could occur if my decision were not recognized. The two methods of PAS in Canada are either being directly administered a lethal dosage or being
prescribed or provided a drug that the person will take by themselves (Government of Canada, 2019). I am telling you this because these are the safe, legal methods of PAS. Without the help I would need, I may be pushed to seek drastic measures. Secret practices of physician-assisted suicide leave the doctor to decide what criteria will be used, and how the “death is assisted” (Pugliese, 1993, p. 1292). It is scary, but I would consider it if it was my only other option. Maybe you think that if I were to ever become irremediably ill, I would not be mentally capable to make this decision. Well, I am mentally capable now, and I am stating that this is my final decision. I should not have to die in secret, and I would not want to die with any resentments towards you both. Moreover, I do not want to be forced into desperation to the point where I find suicide to be my only option. It would not be fair for me to choose between prolonging an unwanted, painful life or taking matters into my own hands. Being coerced into living the rest of my life in pain would be involuntary and fatal to my soul. I am not trying to threaten you with the act of “killing myself.” I just wanted to let you know that I would like your support and that I would not want to hide and die alone.

Everything considered, I can assure you that my decision was not easy or lighthearted for me. I understand my choice may be difficult to swallow for you as well. I am certain PAS would be my verdict if I were to develop a life-debilitating illness. Perhaps people may think PAS is too morbid, but it is an individual’s choice, my choice. I am not taking my life for granted. I am just considering the possibilities with what I have already experienced. Most significantly, I have researched enough to determine it would be my first option. What I want for myself and my body is my decision, and I am not afraid of criticism from the church, nor am I afraid of the consequences I would supposedly be facing from God. In my eyes, PAS is both ethical and legal. I do not need to justify my opinions to satisfy others. Possible dire consequences could occur if I
were “forbidden” to make this decision for myself, and I would not want our relationship to fall apart because of it. PAS is something I have thought about while living with chronic pain, and I know you have both seen how much I have suffered over the last five years. I am grateful for this life, and I am happy right now, but this choice is something I have always wanted to explain to you because I am still afraid of my chronic pain. I am still hurting, and I hope you will not hate me after reading this or think I am being too selfish. I am not asking for your immediate support, just some understanding, respect, and hopefully your unconditional love.
References


