

Pastoral care and voluntary assisted dying: a review of selected literature

Tania Nelson

Since voluntary assisted dying (VAD) legislation is relatively new in Australia, there is limited academic literature that explores the pastoral care considerations that have arisen as a result of the introduction of VAD. This article offers a brief critique of several recent writings on the topic of VAD that may offer helpful background reading for pastoral carers, chaplains and pastors as they prepare to be present to a person seeking VAD or to be present to a friend or relative of someone who has chosen VAD.

Research conducted by Digby et al in 2022¹ demonstrates the breadth of opinion on VAD as reported by healthcare professionals in a Victorian hospital. The study asked 382 clinicians to comment on VAD, potential workplace challenges and staff support required. Six themes arose from the survey: polarised views; fear of conflict; emotional burden; vulnerable patients; organisational challenges and decision-making. The paper concluded that the participants:

expressed polarised opinions about VAD and showed considerable anxiety about its introduction. Additional education and support are required to ensure that clinicians understand details of the legislation and their professional and personal options. Tolerance and respect for alternative viewpoints must be advocated within the organisation and more broadly.²

The paper is recommended reading to assist in understanding the range of opinions on VAD and the implications of VAD legislation in the workplace.

Leaving: A Narrative of Assisted Suicide,³ authored by Anthony Stavrianakis, is a narrative account of five case histories of people who ended their lives with assistance in Switzerland. The publisher promotes the work by stating that:

Stavrianakis places his observations of the judgment to end life in this way within a larger inquiry about how to approach and understand the practice of assisted suicide, which he characterizes as operating in a political, legal, and medical ‘parazone,’ adjacent to medical care and expertise. Frequently, observers too rapidly integrate assisted suicide into moral positions that reflect sociological and psychological

1 Robin Digby, Rosalind McDougall, Michelle Gold, Danielle Ko, Lisa O’Driscoll and Tracey Bucknall, ‘Introducing voluntary assisted dying: staff perspectives in an acute hospital,’ *Int J Health Policy Manag.* 11, No. 6 (2022): 777–785, <https://doi.org/10.34172/ijhpm.2020.216>.

2 Digby, et al., ‘Introducing voluntary assisted dying,’ 777.

3 Anthony Stavrianakis, *Leaving: A Narrative of Assisted Suicide* (Oakland, CA: University of California Press, 2019).

commonplaces about individual choice and its social determinants. *Leaving* engages with core early twentieth-century psychoanalytic and sociological texts arguing for a contemporary approach to the phenomenon of voluntary death, seeking to learn from such conceptual repertoires, as well as to acknowledge their limits.⁴

Leaving is available as an ebook through the University of Divinity library and through bookstores. The case studies may assist the carer to process the varied reasons for accessing VAD and how to be present to the one who chooses to leave and to those who are left behind.

*Voluntary Assisted Dying*⁵ is Dupuche's text for a panel discussion with the Council of Christians and Jews held prior to the introduction of VAD legislation in Victoria. He argues for the profound value of the process of dying and the dignity of being accompanied in dying. The short paper concludes with a call to government to 'enhance the process of dying by developing the scope of palliative care'. This paper provides a simplistic Christian perspective on VAD. It complements the Committee for Care Ministries' End of Life Issues paper.⁶

Fleming, in his article 'Is Presence Always Complicity? An Analysis of Presence, Its Moral Objects, and Scandal in Proximity to Physician-Assisted Suicide and Euthanasia'⁷, draws on Catholic theological ethics and the vision of end-of-life care in the Vatican's *Samaritanus Bonus*⁸. He differentiates between presence in the lead up to VAD and presence at the time of the act itself. Fleming describes the traditional three fonts of Catholic ethics—the intention of the carer, the moral object of the action chosen, and the circumstances—which when held together assist in evaluating the morality of a given action. He concludes that presence at the time of death via VAD 'could be an expression of the noble and challenging vision of end-of-life care articulated in *Samaritanus Bonus*—which remains, despite everything, at the side of the dying person.'⁹

The Good Samaritan who goes out of his way to aid an injured man (cf. Lk 10:30–37) signifies Jesus Christ who encounters man in need of salvation and cares for his wounds and suffering with 'the oil of consolation and the wine of hope'. He is the physician of souls and bodies, 'the faithful witness' (Rev 3:14) of the divine salvific presence in the world. How to make this message concrete today? How to translate it into a readiness to accompany a suffering person in the terminal stages of life in this world, and to offer this assistance in a way that respects and promotes the intrinsic

4 Publisher's comment accessed 5/07/2023 from <https://www.ucpress.edu/book/9780520344471/leaving>.

5 John R. Dupuche, 'Voluntary Assisted Dying,' https://www.academia.edu/101653022/Voluntary_Assisted_Dying, accessed 3 July 2023.

6 The 'End of Life Issues' paper can be accessed here: <https://www.lca.org.au/departments/local-mission/care-ministries/events-training-resources/>.

7 Daniel Fleming, 'Is presence always complicity? An analysis of presence, its moral objects, and scandal in proximity to physician-assisted suicide and euthanasia,' *Theological Studies* 82, No. 3 (2021), 487–508, <https://doi.org/10.1177/00405639211032707>.

8 *Samaritanus Bonus* https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20200714_samaritanus-bonus_en.html, accessed 3 July 2023.

9 Fleming, 'Is presence always complicity?' 508.

human dignity of persons who are ill, their vocation to holiness, and thus the highest worth of their existence?¹⁰

Fleming's paper, and the *Samaritanus Bonus* document itself, is recommended for pastoral carers who are considering the morality of their presence with, or their refusal to be present to, the VAD recipient.

Staff of Lutheran Aged Care and Community Services, as well as church workers in Lutheran congregations, appreciate the Lutheran Church of Australia's (LCA) clear VAD position statement:

The LCA does not support voluntary assisted dying (VAD), however it undertakes to support all people, seeking to bring God's love to life in crucial life and death situations. Staff and volunteers in aged care and other community care settings will not participate in the processes of VAD or seek to influence decisions, as directed by state laws. However, a respectful and pastoral approach will be negotiated and maintained throughout the process, extending to family members as they face imminent bereavement and the need for after-death rituals and care.¹¹

While the statement is clear as to the LCA's stance, it is in negotiating and maintaining a respectful and pastoral approach, that the pastoral carer benefits from an appreciation of their personhood and an understanding of the importance of their presence. May God grant us all ears to hear like Jesus and eyes to see Jesus' image in those with whom we minister.

Tania Nelson is the Executive Officer - Local Mission for the Lutheran Church of Australia and New Zealand (LCANZ). An aspect of her role is support for the LCA's Care Ministries.

¹⁰ Introduction, *Samaritanus Bonus*.

¹¹ The VAD Position Statement was approved by the General Church Board of the Lutheran Church of Australia in 2023. The full VAD Doctrinal Statement and Theological Opinion (DSTO), of which the position statement is a part, will be available on the LCA website once the consultation period is complete.