

Reflecting on the process to develop a voluntary assisted dying DSTO for the LCANZ

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Background

In August 2022, the Chair of the Committee for Care Ministries (CCM) approached me as Chair of the Commission on Social and Bioethical Questions (CSBQ) to discuss the issue of voluntary assisted dying and to commence a process of providing an LCANZ position on this issue. In recent times, every state and territory of Australia had passed legislation to permit voluntary assisted dying, and these laws were being progressively implemented following development of guidelines and regulations to control how this practice could be accessed and administered.

Through this early discussion, the focus was on how the existing LCA Doctrinal Statement or Theological Opinion (DSTO) on *Euthanasia or mercy killing* (LCA 1981)¹ could be applied, particularly in a practical way, particularly noting the concurrent need to provide pastoral care within care agencies of the LCA. This paper seeks to outline and reflect on the process that was undertaken within LCANZ to provide an LCANZ position on this matter and the ethical issues that have arisen and still need to be resolved.

The process

Initial discussion involved the two chairs of CCM and CSBQ, the Assistant to the Bishop Public Theology, and the Governance Enhancement Coordinator for Aged Care and Community Services for the LCANZ. The initial action was to prepare and run two sessions with aged care chaplains and senior clinical and management staff of aged care facilities. The main purpose of the sessions was to provide the context in which legalised voluntary euthanasia was being undertaken or was about to be undertaken in various jurisdictions in Australia. These sessions provided attendees with a summary of the key points and also provided an opportunity for questions to be raised.

These sessions were undertaken on 21 October 2022 in South Australia. The sessions presented some information about the legislation applying in each jurisdiction, followed by a facilitated session that gathered a list of issues, discussed pastoral responses, and sought to identify the resources needed within the sector to adequately address the pastoral responses as well as the legal response.

From this session, the two Chairs then prepared a draft paper that summarised the context

1 Lutheran Church of Australia, DSTO Vol 1H: Euthanasia or mercy killing (1981), <https://www.lca.org.au/departments/commissions/cticr/>.

for the LCANZ, provided a short LCANZ statement that could be included in agency policy, and provided the principles of a pastoral response as well as the theological basis for the position taken by the LCANZ on this issue.

This draft document was circulated through both the CCM and CSBQ for comment and was finalised in late 2022 before presenting to the LCANZ College of Bishops and General Church Board in January 2023. The draft was approved for consultation with Boards, Commissions, Committees and Agencies of the LCANZ with consultation taking place from January 2023 to end of March 2023. The consultation was undertaken using a survey via Microsoft Forms, seeking responses to the following questions:

1. Please indicate the name of your Board, Commission, Committee or Agency and whether Churchwide or District. If District then please indicate which District.
2. If this DSTO Statement is approved by General Church Board, to what extent would your District/Agency refer to it and embed the LCANZ Position Statement and its principles in your programs and decision-making?
3. How might the LCANZ Position Statement and principles outlined in the DSTO Draft Statement affect the current operations of your District/Agency?
4. Please summarise any current or recent action (since 2020) that your District/Agency is taking or has taken which aligns with the LCANZ Position Statement and principles of the DSTO Draft Statement.
5. Please indicate any inconsistencies or conflicts between the LCANZ Position Statement and principles of the DSTO Draft Statement and any policies or statements that your District/Agency has published, particularly relating to voluntary assisted dying.
6. How satisfied are you that the DSTO Draft Statement, as a guidance document, addresses the issue of voluntary assisted dying and explains the position being adopted by the LCANZ?
7. Does your District/Agency have adequate resources to address the issue of voluntary assisted dying?
8. Please provide any other comments here.

Comments were collated and a revised draft was developed in May 2023. This revised draft was then presented to CSBQ at its workshop on 19 May 2023 for final comment. Some additional suggestions were made at this point and incorporated into the final draft.

The final draft was considered by the LCANZ College of Bishops and the General Church Board in July 2023. With the final draft is a list of suggestions arising from the consultation of the draft including whether they were incorporated into the final draft revisions or whether the issues raised were not incorporated into the draft document but are relevant to implementation within agencies.

Reflection on the process

The sessions in October 2022 particularly focused on aged care services and responsibilities of service providers but highlighted the need for all pastors and congregations to be aware of the legislation and appropriate pastoral responses. Boards of various services, including aged care, were already considering and developing policy and procedures to be able to respond appropriately to legislation that had been or was to be implemented in each jurisdiction. While there was much discussion within Aged Care and the Committee for Care Ministries, there was less discussion within CSBQ until a first draft of a DSTO document was circulated.

The process to develop a draft document also involved agreement on what to call the document, and its relationship to the existing DSTO on Euthanasia or mercy killing (LCA 1981). In preparing the draft document, it became clear that the template for DSTOs goes beyond what is expected in respect of guidelines for pastoral care in practice. It was proposed that a short overarching LCA NZ statement was needed, and that the DSTO puts this statement into a theological context.

In reflecting on the process of consultation, decisions were made in respect of how long the consultation would be. Two months was considered to be adequate, however there were some additional comments made by CSBQ members following a revision to the consultation draft document. There were also decisions to be made about the suggestions and which to include.

The finalisation of the document was undertaken jointly by the Executive Officer Local Mission and the Chair of CSBQ with comments provided by the Chair of CCM. In preparing the papers for the LCA NZ College of Bishops and General Church Board, the suggestions were also listed and attached as well as the final draft DSTO document.

It was considered to be important to include views and suggestions expressed by those completing the survey during consultation. These comments provide a summary of the wide range of views that exist within the LCA NZ and the need for guidance in delivering pastoral care within institutions of the church.

Once the draft document is approved, there will be a need for a communications plan to be developed. There will also be a need for the CCM to work with aged care service agencies and Districts of the church to enable broader understanding of the legislation applying in each jurisdiction and the church's position in respect of not condoning voluntary assisted dying but committing to provide pastoral care to those wanting to legally end their life, in this way as well as to their family and friends.

Key learnings

A joint approach involving the CSBQ and CCM seemed to work well, although as both bodies are made up of volunteers, the timeliness of decision making can be protracted. Assistance from the Executive Officer for Local Mission during crucial stages was appreciated.

Working jointly also provided access to those providing pastoral care in various jurisdictions

in the LCANZ. The needs of these people were clear—they were less interested in the theological context and were seeking pastoral care guidance. In particular, there were a number of scenarios suggested during consultation that are relevant to providing pastoral care. It is important to be able to communicate the difference between a DSTO document and guidance for pastoral care for those on the frontline.

From an ethical perspective, this issue highlights that there are a number of different perspectives and views held within our church membership and within staff of aged care facilities, including those who provide pastoral care. At no stage during the consultation did aged care facilities express a view that they no longer wished to be in the business of providing care to residents who might be considering legal access to assisted dying. Time will tell how pastoral care takes place and how the learnings from practical experience can be shared with others across the LCANZ.

This is the first time that CSBQ and CCM have worked together in this way. It could well be replicated in the development of other statements of the church about issues where the practical application of our theology intersects with the complex human issues faced by our aged care and community services and similarly with our Lutheran schools.

Next steps

Following consideration by the LCANZ College of Bishops and the General Church Board, it will be time to hand over the document from CSBQ and CCM. It is expected that this DSTO will be listed on the LCANZ DSTO website. At that time there will also need to be a review of the pre-existing DSTO on *Euthanasia or mercy killing* (LCA 1981).

As stated previously there is a need for communication across LCANZ, and also the development of some accompanying practical pastoral care guidelines. This work will need to be sensitive to the nuances of legislation in each jurisdiction in terms of coercion. The suggestions made during consultation should be studied and those involved in providing pastoral care should be included in the process of development of scenarios and associated pastoral care responses.

While CSBQ has been involved in development of the DSTO on voluntary assisted dying, the development of other resources should utilise the knowledge that exists within the LCANZ more broadly and should be led by CCM.

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