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NURSES' ATTITUDES TOWARDS ACTIVE VOLUNTARY EUTHANASIA: A SURVEY IN THE AUSTRALIAN CAPITAL TERRITORY

by

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ABSTRACT

In a country such as Australia which claims adherence to democratic values, it would appear important that policies and laws on such a controversial and value laden issue as active voluntary euthanasia (AVE), need to have at least some basis in public opinion and in that of relevant professional groups. It has been argued that public opinion may be of limited value due to the public's lack of experience and exposure to this issue. The opinions of people with more exposure to and reflection on the ethical issues surrounding euthanasia need to be ascertained. Nurses are one group who have prolonged involvement with the care of dying or suffering people and their families. Nurses in the Australian Capital Territory (ACT) could be a particularly well informed group because of the ongoing open debate resulting from four proposed laws on AVE in this Territory since 1993. The overall purpose of this thesis was to identify the attitudes of nurses in the ACT towards AVE.

This thesis was supported by a study which provided information on four aspects of nurses' attitudes towards AVE. Firstly, the attitudes of registered nurses in the ACT were compared to those of other nurses, medical practitioners and members of the general public in Australia. Secondly, the associations between characteristics of the nurses and their attitudes were investigated. Thirdly, the legal conditions which nurses believe should be in a law allowing active voluntary euthanasia were identified. Finally, the arguments nurses put forward to support their attitudes towards AVE were analysed. This thesis does not attempt to evaluate the ethical arguments proposed, merely to reflect the views put forward.

A postal survey was carried out in late 1996 of 2000 randomly selected registered nurses from the Australian Capital Territory. Responses were received from 1218 nurses (61%).

Attitudes of Nurses

A majority of nurses who responded, supported AVE as "sometimes right", be it homicide by request (72%) or physician assisted suicide (71%). A slightly smaller majority of nurses believed the law should be changed to allow homicide by request (69%) and physician assisted suicide (67%) under certain conditions. If AVE were legal, 66% of the nurses indicated they were willing to be involved in the procedure. Only 30% were willing to assist patients to give themselves the lethal dose, while 14% were willing to administer the lethal dose to the patient. Comparing these results with previous surveys, it appears that nurses are less in favour of AVE than the general public but more in favour than medical practitioners.
Associations between Characteristics of Nurses and Attitudes

Those nurses who were more likely to agree that the law should allow AVE, were under the age of 40 years, agnostic, atheist or of the Anglican religion, to have less contact with terminally ill patients, to work in the area of critical care or mental health, and to take less interest in the issue of AVE. Palliative care nurses were the only subgroup without a majority in favour (33%). There is other evidence in the euthanasia literature indicating that nurses and doctors are less in favour of AVE than the general public. Taken together with the present findings, it may be concluded that attitudes towards AVE are more favourable in people who have less contact with the terminally ill.

Legal Conditions in an AVE Law

The conditions most strongly supported in any future AVE law were "second doctor's opinion" (85%), "cooling off period" (81%), "patient must have unbearable protracted suffering" (80%), "doctor must inform patient about illness and treatment" (78%) and "patient must be terminally ill" (63%). There was only minority support for "patient not suffering from treatable depression" (42%), "patient administers or assists to administer, the fatal dose themselves" (32%) and "patient over a certain age" (7%). Support for a change in the law to allow AVE was 38% for a young man with AIDS, 39% for an elderly man with early stage Alzheimer's disease, 44% for a young woman who had become quadriplegic and 71% for a middle aged woman with metastases from breast cancer.

Arguments Supporting AVE Attitudes

The most common argument in support of AVE was that people should have the right to control their own lives and thus be able to decide for themselves when and how they wanted to die. The most common argument against AVE was that of the slippery slope in which it is feared that the boundaries which society puts on killing will be extended.

Conclusions

This inquiry pinpoints the discordance between attitudes towards AVE and the legal status of AVE. Parliamentary representatives need to consider the current attitudes of their constituents, and especially those of relevant health care professionals towards AVE. It is important that a nursing perspective is represented in any law legalising AVE and that the role of the nurse is clearly described in relevant legal acts. Future research would also be beneficial to investigate further the association between the experience of nurses working in a palliative care setting and AVE attitudes. There needs to be further debate about the legal conditions required in any future AVE bills.
given the lack of support from nurses for some conditions which have been included in proposed AVE laws. Furthermore, it would be valuable to carry out surveys of the opinions of other health practitioners in order to inform legislators. These results form a baseline to examine the changes in attitudes towards AVE over time and change in the legal status of AVE.
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