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Article in *Jurnal THEOLOGIA* · June 2021

DOI: 10.21580/teo.2021.32.1.8380

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***Euthanasia* in Christian Ethic-Theological Context: Pros And Cons**

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Abstract: Science and technology are undergoing rapid development and progress. It is due to the increasing number of modern inventions. Among the technological discoveries that are very important are in the medical field. With modern medical equipment, the suffering of a patient can be reduced. But in reality, there are still some patients who have severe suffering. Patients who experience prolonged illness invites empathy from the family. To relieve his suffering, the family who could not bear to see his condition asked the doctor to take actions that could shorten the patient's life, this kind of action in the medical world is known as euthanasia. This study aims to find out how the study of active euthanasia in the view of Christian law. This study is a literature review using an ethical-theological approach by studying books and scientific works related to the discussed problem.

Keywords: Christian Ethic-Theological; Christian law; Euthanasia; Human Right

A. Introduction

Euthanasia is "the act of actively or passively causing the death of a person to prevent suffering." It is "the art of killing people suffering from an incurable condition or disease." The issue of euthanasia is one of the most difficult moral issues that arise in terminal medical care. It is happening with greater frequency and is much more challenging to complete due to advances in the arts and medical sciences. The issue of euthanasia is not merely a medical ethics issue but also bioethics and, therefore, interdisciplinary.¹ It even includes legal issues. Euthanasia is usually associated with suicide or suicide problems. In Criminal Law, the issue of suicide that needs to be discussed is whether someone who tries to commit suicide or helps others commit suicide can be punished, because they

¹ J.E. Sahetapy dan Mardjono Reksodipuro, *Parados dalam Kriminologi* (Surabaya: Pusat Studi Kriminologi Fakultas Hukum Unair, 1976) 56.

are considered to have committed a crime.² The Code of Criminal Law (KUHP) Chapter 2 article 344 states: "Whoever takes another person's life at his request which is clearly stated with sincerity, is threatened with a maximum imprisonment of twelve years."³

Then there is another problem with the Indonesian Medical Code of Ethics; some also say that doctors are not allowed to:⁴ abort a pregnancy (*abortus provocatus*) and end the life of a patient, who, according to science and experience, is impossible to recover (*euthanasia*). Recently, there is a case of "Tilly Hutapea Rampen," a candidate for a doctoral degree at Airlangga University Surabaya. He has been undecided for ten years, as his dissertation untested. The story began when his dissertation was submitted; Tilly conducted research on euthanasia, and he agreed to the practice of euthanasia by injection. His promoter, Prof. Dr. Sahetapy disagreed with Tilly's opinion, so Sahetapy resigned as his promoter. As a result, Tilly's dissertation has remained untested to this day. Even though the Rector of Airlangga University has agreed that Tilly's study can be examined, no one dares to continue it, including the head of the program.⁵ So, a person's attitude towards euthanasia is critical and can affect his academic or professional career. So, What are the positive and negative impacts of euthanasia?

This study aims to see what euthanasia is. What is the history of euthanasia? What are the pros and cons of euthanasia? And lastly, the author tries to contribute to ethical and theological reflection towards euthanasia. This article uses a descriptive literature approach. The data were derived from books, articles, and various writings that discuss euthanasia.

B. Euthanasia: Die without Suffering

Euthanasia comes from two Greek words, "eu" and "thanatos", meaning "good death" or "gentle death." The closest English term is "Mercy Killing."

² Djoko Prakoso & Djaman Andhi Nirwanto, *Euthanasia Hak Asasi Manusia dan Hukum Pidana* 63, In some countries, such as the United States, a person who fails to commit suicide can be punished. Likewise, in Israel, a suicide attempt is prohibited by law and is punishable.

³ Moeljatno, *Kitab Undang-undang Hukum Pidana* (Yogyakarta: UGM, 1971)117.

⁴ Indonesian Medical Code of Ethics – appendix III (Declaration of Genewa) by the Editorial Committee of the National Medical Ethics Conference (Jakarta: Yayasan IDI, 1969).

⁵ Hud, "Nasib Tilly Hutapea Tergantung Sahetapy?" *Jawa Post* 29 April (2001) 18, Even *Jawa Post*, on April 28, issued a cover story on it, then on April 29, was still discussing the same issue.

Euthanasia comes from a world philosophy that is willing to accept well a bad deed, saying that bad deed can change radically to become good because the motivation and purpose are good. This idea comes from the New Morals and Situational Ethics⁶ which says that goals and motivations determine the good or bad of any action. According to Situation Ethics: "Good and bad have no absolute rules. Good or bad depends solely on one's motivation and love."

Euthanasia is one of the direct results of the New Moral and Situational Ethics. The situation at that time arose a dilemma: whether a doctor has the legal right to end a person's life at the request of the patient himself or from his family, under the pretext of eliminating or ending prolonged suffering. In this case, the doctor faces a legal conflict.⁷ As an ordinary human being, the doctor will refuse the request from the patient and his family. Moreover, the patient's condition had been declining for months, and the doctor knew that the treatment he had given was no longer potential. Said to be dead, the patient is still breathing, albeit artificially. On the other hand, if the doctor fulfills the request of the patient and or his family, the doctor has violated the oath and the law. By removing the "respirator," the doctor could end a patient's life. But, he has been entrusted to take care of the patient.⁸ Euthanasia is divided into three categories, as follows:

⁶ Situational Ethics rejects the faith that takes precedence in Theological Ethics. The Situational Ethics refutes belief in the existence of God and the absoluteness of the Ten Commandments. Ethics Situation openly rebels against what is called "The Establishment." that is a situation that cannot be changed even in the pastoral field. Situational Ethics operates solely in relativism which originates from Hegel's philosophy and is influenced by the development of thought in the fields of Psychology, Sociology, and Liberal Theology. Situational Ethics looks at things not from the point of view of the Rule of Truth which is guided by a definite and fixed standard, but from situations and conditions that are constantly changing with the standard that all actions must be done for the good and must show the characteristics of love. Thus any action can ultimately be justified.

⁷ Djoko Prakoso & Djaman Andhi Nirwanto, *Euthanasia Hak Asasi...*, 58.

⁸ This doctor's oath is known as the Hippocratic Oath. Hippocrates, the father of medicine, was the Greek author of the medical oath, which is still the basis of the oath of office formulas uttered by doctors around the world. Hippocrates suggested that doctors always obey and submit to the duties and responsibilities assigned to them. This is intended so that there is no misuse of the medical profession for actions that should not be carried out by a doctor. An example of a doctor's oath in Indonesia, which is valid on June 2, 1960, based on Perpu No. 26 of 1960, State Gazette 1960 No. 69, quoted by Ko Tjay Sing, *Rahasia Pekerjaan Dokter dan Advokat* (Jakarta: Graamedia, 1978) 93, states as follows: I swear/promise that: (1) I will dedicate my life for the benefit of humanity. (2) I will carry out my duties in an honorable and ethical manner consistent with the dignity of my job, the noble tradition of the medical profession. (3) I will keep everything I know confidential because of my job and my

1. Helping someone to die without suffering. The goal is to relieve the patient's suffering until the patient dies painlessly.
2. Speeding up the death of someone who is already sick for the following reasons: his life is no longer helpful: disabled, crazy, seriously ill, and so on; it is a burden to others; there are already too many people in the world; the person is of another race or nationality; that person has a different ideology, even against society; cruel person.
3. Mercy-killing: gentle killing at the request of the patient himself, the request of the family, or the state.

Another opinion says that euthanasia is divided into two: First, active euthanasia, i.e., the patient's life is actively terminated, such as lethal injection. Secondly, passive euthanasia, i.e., the patient is not killed but is left to die. The other categories are *voluntary*, *non-voluntary*, and *involuntary* euthanasia. *Voluntary euthanasia* occurs when the patient requests (consent) to die early. *Non-voluntary euthanasia* occurs when the patient is unable to make judgments or voice wishes in this matter and therefore does not express any desire, for example, in a coma. In this case, the family can take over the decision. Finally, *involuntary euthanasia* occurs when the patient expresses that he does not want to die but left to die by another party.⁹

C. Euthanasia Historical Problems

“...You shall not kill the innocent and the righteous, for I will not justify the guilty” (kel 23:7b).

The Hebrew phrase here translated as “innocent person” means “imbecile [one who is foolish, crazy], the one who is weak in senses.” Because it was

knowledge as a doctor. (4) The health of suffering will always be my priority. (5) In fulfilling my obligations to the sufferer, I will make every effort to avoid being influenced by considerations of religion, nationality, ethnicity, party politics, or social position. (6) I will pay my Master's due respect and gratitude. (7) I will treat my colleagues as siblings. (8) Even if threatened, I do not use my medical knowledge for anything against the law and humanity. (9) I make this oath/promise solemnly and by risking my honor.

⁹ Kuntadi dan Indriani Sumadikarya, “Euthanasia dan Penyakit Tak Tersembuhkan serta Pengharapan Kristiani,” *Penuntun* Vo. 2, No. 7 April-Juni (1996) 287.

customary for the nations surrounding ancient Israel to kill people with disabilities by suffocating them; but the God of the Israelites was also the God of the disabled.¹⁰ The law in Sparta also demanded that all deformed babies be killed. It was considered better than an unhappy life for them and their parents. Infanticide was not only applicable in Sparta but also in Athena.¹¹ Pythagoras, Plato, and Aristotle rejected suicide committed to avoid a hard life or to avoid the duty to oneself and the state. Still, all three considered it unreasonable to apply euthanasia. Adolf Hitler himself passed a law that ordered that all "useless lives," i.e., mentally disabled people, be killed. Hitler decided for himself what was valuable and what was not, then ordered that everything that he thought was worthless was then vanished.

A Nazi organization called the *Reichsarbeitsgemeinschaft Heil und Pflegeanstalten* or RAG was the Reich's working group on housing and care, working on Berlin's 4th Tiegarten Street. Their patients are called "euthanasia detainees" because this agency was deliberately created to carry out a large-scale killings program through medical treatment. In addition, the Nazis also euthanized homosexuals in concentration camps of about 500,000 victims and exterminated Gypsies of about 200,000 to 600,000 victims. Of course, the euthanasia that was applied was involuntary (the patient did not want to die, but it was still carried out).¹²

The euthanasia case began to draw worldwide attention when dr. E.M. Pathy got authorization from the patient to do euthanasia. The patient, Oscar Aged, was in a state of suffering from an incurable disease. The doctors say the patient will meet his death due to the illness. It wasn't long after that his organs had deteriorated and no longer functioned. Then, the patient begged the doctor to end his life. But, from a legal perspective, the problem is, does a doctor have the legal right to end the life of an incurable patient? So that an international assembly was held, 22-23 August 1977 [to open the World Law Conference] in Manila,

¹⁰ J. Verkuyl, *Etika Kristen Kapita Selekt* (Jakarta: Gunung Mulia, 1986) 226.

¹¹ Kuntadi dan Indriani Sumadikarya, "Euthanasia dan Penyakit Tak Tersembuhkan serta Pengharapan Kristiani," 284.

¹² R. Jay, *The Nazi Doctors: Medical Killing and Psychology of Genocide* (London: Papermac, 1986) 95-97; see also Heger, *The Men with the Pink Triangle* (Boston: Alyson, 1980) 12; juga D. Kenrick dan G. Puxon, *Destiny of Europe Gypsies* (New York: Basic Books, 1972) 72.

Philippines, which invited judges from the Philippines, Zambia, Pakistan, Thailand, Canada, Senegal, Tanzania, India, Bangladesh, Iraq, Israel, the Soviet Union, which finally decided: "the law does not recognize the human right to die."¹³

The World Law Conference, which the World Peace organized Through Law Center in Manila, was attended by various figures in law and medicine from multiple countries to discuss euthanasia. The results still resembled a pseudo-trial. It is difficult to find common ground to agree on euthanasia. Even so, there are already signs that legal and medical professionals are starting to count euthanasia as part of their profession. UK (Scotland): Euthanasia is illegal. However, in 1993 and 1994, courts gave doctors the right to end the lives of artificially preserved people. In June 1996, a patient in Scotland was "allowed to die." Michigan (USA): US federal law prohibits euthanasia. In November 1998, voters in Michigan rejected the legalization of "assisted suicide" in a referendum. Oregon (USA): Oregon was the only US state to legalize euthanasia in 1994 for terminally ill patients and which officially requested it. However, because a court opposed its enforcement, there has been no practice of euthanasia.

New York (USA): In April 1996, the court of appeals in New York, which has jurisdiction over Vermont and Connecticut, authorized euthanasia. Colombia: the constitutional court accepted the practice of euthanasia in May 1997 for terminally ill patients who expressly requested it. Australia: The first euthanasia law was devoted by parliament in the Northern Territory in 1966. However, the Australian government passed the Act to annul that Act eight months later. China: In 1998, the government allowed hospitals to practice euthanasia for people who were in the dying phase if they officially requested it. Denmark: Patients with incurable diseases decide when to stop vital care.

Since October 1, 1992, patients with terminal illnesses or victims of serious accidents can make "medical wishes" that doctors must respect. France: Euthanasia is illegal. However, the law distinguishes between active euthanasia, the act of intentionally causing death and being considered homicide, viewed as a refusal to extend the patient's life function medically. On April 10, 2001, the

¹³ See Sinar Harapan, "Peradilan Semu dalam Rangka Konperensi Humkum se-Dunia" Monday, September 26, 1977, 8.

Netherlands became the first country to legalize the Right to Death (euthanasia) after the Dutch Senate approved its bill amid protests by thousands of Dutch citizens in front of the Dutch Senate Building in The Hague. The 75-seat Senate voted 46-28 to enact the Right to Die, which has been rejected for two decades. One member of the Senate did not attend the vote. So doctors who practice euthanasia are not prosecuted in court if they fulfill a patient's request to die.

The requirements for euthanasia passed by the Dutch Parliament that a doctor who will euthanize or assist someone to commit suicide must meet the following requirements:

1. The doctor believes that the patient is making a voluntary request and has considered it carefully.
2. The doctor believes that the patient's suffering is unbearable and that there is no prospect of health improvement.
3. The doctor must inform the patient about the patient's condition and prospects.
4. The doctor concludes with the patient that there is no reasonable alternative regarding the patient's situation.
5. The doctor has consulted with at least one other person, an independent doctor, who has studied the patient's condition and provided a written opinion regarding the criteria for the required treatment.
6. The doctor stops the patient's life or assists to commit suicide with medical action and attention.

It is also possible for children aged 12-16 years to end their life voluntarily through euthanasia, but with parental consent. Permission from other parties is not required for those who are over 16 years of age. The final permit to carry out euthanasia is issued by the Regional Health Committees that already exist in each region and have been carrying out this task since 1996, when the act of euthanasia began to be accepted by the community. And euthanasia perpetrators who do not comply with existing regulations can be sentenced to 12 years in prison. The Dutch government believes that legalizing the Right to Death will reflect all the dark content of the law, which leaves the possibility of prosecution in court if it does not follow strict rules.

D. Euthanasia: Pros and Cons

Euthanasia is a complex problem, so it cannot be seen from the legal and medical aspects alone. Still, many factors play a role in the euthanasia decision. Margaret Tighe, Head of the NGO Right to Life, said, "I can't understand the Dutch [85% of Dutch citizens agree with the Euthanasia Law]. I really can't understand. I am sure that, in future history books, we will look back sadly and angry at what the Dutch had done because euthanasia (volunteering) is a slippery slope." However, what Tighe complained about, became the opposite of The British Humanist Association and the Voluntary Euthanasia Society. These two groups agree, not just agree, but they are pioneers in promoting (looking for supporters) euthanasia.

The British Humanist Association said:

Humanists are sympathetic to voluntary euthanasia. By this we mean helping people to die painlessly if their lives have become hopeless, with no prospect of relief before death; and if they wish to die. Both these conditions must be rigidly adhered to.¹⁴

While, Voluntary Euthanasia Society states:

The main objectives of the Society are to secure the enactment of the 1969 Voluntary Euthanasia Bill by Parliament. This would authorise doctors to give patients euthanasia when they wish it, provided: (a) the patient has signed an appropriate declaration at least 30 days previously; (b) two doctors, one of consultant status, have certified in writing that the patient is suffering from an incurable condition likely to cause him or her severe distress or to be incapable of rational existence.¹⁵

1.1. From the Patient's Viewpoint

Pro Euthanasia said that *firstly* if the patient is in a coma, he breathes with artificial lungs and eats by infusion every day: can such an existence be called human? Is it not precisely our consciousness and responses that give meaning and dignity to our existence? Moreover, the doctor said there was no hope, so he was

¹⁴ T.p., "Euthanasia and Medical Practice in the UK," *Ethics & Medicine* 9.1. (1993) 11.

¹⁵ *Ibid.*

euthanized. Secondly, the family cannot afford what the patient needs. The more days the patient is in the hospital, the greater the cost.

Anti Euthanasia said that the patient was suffering from weighty psychological pressures. Not only the patient, perhaps, his family also felt tortured to see the patient who suffered continuously. In the end, the patient is euthanized, but who can guarantee the reaction of the family who has been left 3-4 months after their lover abandoned them? Who can ensure that they will escape severe psychological shocks caused by guilt: "We killed him, he died because of us, we have become killers, sorrow to us."¹⁶

2.2. From the Medical Personnel

Pro Euthanasia says that the purpose of using euthanasia facilities is to spark compassion practically. It doesn't need to be explained again that medical personnel certainly understand and share a patient's suffering. Even though a patient's suffering is often tough to bear, painkillers have been given and motivated by compassion; they begin to think about euthanasia seriously. Anti Euthanasia said that students of the Faculty of Medicine studied medicine for approximately 7-9 years to preserve the life of a patient, not taking it away; to restore his freshness and health, not to hurry his funeral.

So, in other words, a doctor must not break his oath of office; he must be faithful to his promise. Dorothy Marx saw the dangers of deciding the patient's death because: first, the doctor chooses something with the limitations of his human abilities, while the decision requires God's omniscient knowledge. Secondly, a doctor is not always correct in his predictions. He is not always accurate in his predictions about the condition of his patient. A doctor can make mistakes. Thirdly, a doctor does not know God's plan for his patient. Was God going to heal him miraculously, for God's sake and some purpose? Who are we to interfere with God's excellent plan?¹⁷

3.3. From a Legal Perspective

Pros of Euthanasia, such as Bichon van Ysselmonde, Lombrosso, and Garofalo said that euthanasia was felt to be more practical. The cost was lighter,

¹⁶ Dorothy I. Marx, *Itu 'kan Boleh?* 86.

¹⁷ *Ibid.* 89.

more certain than having to suffer for a long time. Anti Euthanasia such as Modernman, Becaria, Voltaire, Roeslan Saleh, and Sahetapy essentially say that His creator, namely God Almighty determines a matter of life and death.

4.4. From a Religious Perspective

Pro Euthanasia uses John 15:13 as its rationale by saying: "There is no greater love than the love of a man who lays down his life for his friends." So, if the coma has to sacrifice his life because he does not want to burden his family – maybe a matter of cost or a matter of time to wait for him – then euthanasia is a biblical way.

Anti euthanasia's rejection is based on the following: *first*, the Bible never prioritizes physical life, but spiritual life. For the sake of the soul to be saved, sometimes our gross bodies have to be sacrificed. Even so, the body must be cared for responsibly, but our mortal body does not have the same price as our immortal soul. *Second*, the creator who has given life to humans is the only one having the right to determine the time of death. *Third*, Allah can communicate with a human being who is no longer able to communicate with other human beings. We perhaps judge this person's existence as "below human dignity", but he still reacts to God. *Fourth*, the implementation of euthanasia triggers the peak of human rebellion – perhaps without realizing it. The implementation of euthanasia does not characterize the true faith. In the implementation of euthanasia, goodness, wisdom, love, the power of God and so on, all seem to be denied and doubted.

Kars Veling, a member of the Senate from the Christian Union Party of the Netherlands, admits that religious circles do not approve of the euthanasia law. Euthanasia is not something that is imposed on people, but only an option, a last resort, for those who medically no longer have life expectation.¹⁸

Catholic teaching also does not agree. Al. Budyapranata pr argues that he does not agree with euthanasia for the following reasons:¹⁹ *first*, that human life is ruled by God himself. *Second*, humans are meaningful and valuable because of God Himself. Human values are not the result of people's views, not depending on achievements (results) or usefulness. *Third*, we should not determine the fate of

¹⁸ Reuters, "Belanda Sahkan Hak untuk Mati," *Kompas* April 12, (2001) 3.

¹⁹ Al. Budyapranata pr., *Etika Praktis Berdasarkan Sepuluh Perintah Allah* 32.

others but instead show solidarity and love those who are weak and need protection. *Fourth*, endangering others through negligence. This life taking is always unintentional, but in fact it can be avoided if the cause is aware of what he has done, for example: a doctor who prescribes drugs carelessly. Islamic teachings also prohibit euthanasia as shown in the hadith of the Prophet Muhammad S.A.W. narrated by Annas R.A.:

“None of you should long for death because of a calamity that had befallen him, and if he cannot, but long for death, then he should say, 'O Allah! Let me live as long as life is better for me, and take my life if death is better for me.’”

Surah An Nisa' verse 29, Al An'am verse 151, Surah Al Isra' verse 31, and Surah Al A'raf verse 34 also emphasize the prohibition on euthanasia. For example, Surah An Nisa' verse 29:

O you who believe! do not devour your property among yourselves falsely, except that it be trading by your mutual consent; and do not kill your people; surely Allah is Merciful to you.”²⁰

E. Ethical and Theological Criticism

1. Critical Ethical Review

The Universal Declaration of Human Rights, article 3, states: "Everyone has the right to life, liberty and the security of person".²¹ This article states that a person has "the rights to life", "liberty" and "the security of person". Regarding the right to life is further stated in "The International Covenant on Civil and Political Rights" which has been effective since March 23, 1976, in Part III Art. 6 (1), it is stated that: "Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life".²² Then in Part III art. 7 is stated as follows: "*No one shall be subjected to torture or to cruel in human*

²⁰ Bachtiar Surin, *Terjemahan dan Tafsir Alquran* (Bandung: Fa. Sumatera, 1978) 118.

²¹ Sir Francis Vallat, *An Introduction to the Study of Human Rights* (London: Europe Publication Limited, 1970) 119.

²² Muladi, "Hak untuk Mati," Naskah Diskusi Mingguan Fakultas Hukum Undip, September 8 (1979) 4.

or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation."²³

As a follow-up, in May 1970, The World Health Assembly, decided that "The right to health is a fundamental human right." So in the UN declaration on human rights, what is clearly recognized is only the right to life. According to Djoko Prakoso, these human rights are currently only moral rights and are not positive rights, which can be demanded for compliance both inside and outside the court.²⁴

The right life is the right moral standard for human existence in carrying out their lives. "Right" here needs to be understood as: (1) as it is (should be); right; not wrong; (2) impartial; fair; (3) reliable (according to the actual situation); legitimate; honest; true.²⁵

So when studied more deeply in the sense of "true life", living according to what it is or in accordance with the actual situation; the true life as the one being based on no lies is a thought that has firmly rejected the presence of euthanasia. True life allows human existence to live as it is. If one has an obstacle in his physical disability or maybe his mental disability, or is sick in a coma position, then the existence of life as it is allows the human to complete his existence until he is actually declared dead. And the death is legal, not lying or being said to be a true death that does not have to be pulled over to die quickly. Even the Indonesian Law no. 39/1999 concerning Human Rights Article 9 states that: "Everyone has the right to live, maintain life and improve their standard of living."²⁶ So, the true life, life as it is that needs to be maintained is the right of every human being. These values undeniably reject euthanasia.

This rationale is part of the ethical consideration that euthanasia is very contrary to the values of "the right to life" which have been used as the basis of human rights values. So whatever the reason, if a country has approved a euthanasia law like the Netherlands, then that country has violated human rights

²³ *Ibid.*

²⁴ Djoko Prakoso & Djaman Andhi Nirwanto, *Euthanasia Hak Asasi Manusia dan Hukum Pidana* 135.

²⁵ Tim, *Kamus Besar Bahasa Indonesia* (Jakarta: Balai Pustaka, 1989), 99.

²⁶ *Undang-undang tentang Hak Asasi Manusia 1999 dan Undang-undang tentang Unjuk Rasa* (Bandung: Citra Umbara, 2000), 8.

values. So, it is not surprising that many figures criticize cynically against the ethical history of the “cheese” country.

Edeltraut Gatteres, a spokesman for the European Parliament said that the law [passed by the Netherlands] was contrary to European conventions on human rights. In article 2 [human rights values], for example, death cannot be imposed on a person intentionally, including for those who are terminally ill or dying. However, the law still opens the possibility for doctors to be prosecuted if they do not comply with strict rules.²⁷ As a result, Gatteres firmly rejects the existence of euthanasia which is contrary to human rights values.

2. Critical Theological Review

The theological stance is very clear in the 6th commandment: “you shall not kill” (Ex 20:13) and is emphasized in Deut. 5:17, Rom. 13:9; James 2:11. Obviously, it refers to an engineered killer act: killing a person, group, or self.

In the Bible the verb “to kill”, to commit an act of murder occurs about 14 times, as the word “kill” (killed) about 130 times, while as a noun (can also be a subject) with the word “murder” occurs about 16 times. So, although there are fewer acts of murder compared to being killed or killed (non-volitional), the commandment “do not kill” is a fixed price that cannot be negotiated that anyone who violates these values is a rebel against God’s will.

So Matthew 5:7 says, “Blessed are the merciful, for they will receive mercy.” In this verse God asks us, that we also heed and love human life, including humans with mental disabilities. Verkuyl emphasized that the phrase “do not kill” here means not only killing healthy people but also people with mental disabilities. Be it in the short term or in the long term. But love them for Christ, who is also their Savior.²⁸

Genesis 22:12 points out emphatically that the practice of killing children since OT times was rejected, when Abraham was about to offer his son to God and God himself forbade Abraham to sacrifice his son. Even when the baby Moses was born, Pharaoh ordered to kill the baby Israel but the baby Moses was protected

²⁷ Yanto M., “Membunuh atau Sekadar Menceraiakan Nyawa dari Tubuh yang Sengsara,” *Tempo* 12 April (2001) 7.

²⁸ J. Verkuyl, *Etika Kristen Kapita Selektia* 227.

by Allah. Even when the baby Jesus was born and Herod ordered the killing of the babies in Jerusalem, the angels protected the baby Jesus from that heinous murder. So, it is clear that Allah forbids killing. God defends and protects His people. Even Jesus Christ came to this world for us, sinners who do not deserve anything, also in the field of decency. Jesus Christ also wanted to be a Savior for people with mental disabilities. He was not ashamed to acknowledge them as His brothers (Heb 2:11-18; 1 Tim 2:4). Suicide is prohibited because one's life is seen as a gift and belongs to Allah, only Allah has the right to take it. So that euthanasia is an act of rebellion against God (Gen 2:7).

Indeed, the Bible has a lot to say about disease. In statistics according to the LAI (Indonesian Bible Society) Bible, the word "ill" is found in 919 verses and "illness" in 104 verses. The details are as follows: blind (81 times), leprosy (59 times), pestilence (54 times), paralysis (27 times), deafness (6 times), tinea versicolor (13 times), fever (11 times), scabies (11 times), pain in childbirth (10 times), pain in labor (7 times), bleeding pain (3 times), nearsightedness (3 times), epilepsy (2 times), dry cough (2 times), heartburn (1 time), inflammation (1 time), hunchback (1 time), edema (1 time), dysentery (1 time), intestinal disease (1 time), and lung disease (1 time).²⁹ However, the disease that leads to euthanasia is not explained. Even the diseases above that are considered serious, such as leprosy, bleeding disease, or blindness, Jesus was able to give healing. So, it is clear that Jesus is the healer of all diseases so that if there is severe suffering, say a coma, then when someone commits suicide how unwise he is. If only he still surrendered to Allah and Allah wills then all the diseases he suffers will surely be touched and healed by Allah. The only question is whether God's plan for our lives is in accordance with our will. If it is, surely Allah will do the same things as humans want, but if Allah has a plan of his own then humans cannot force Allah to cancel His plan.

Bonhoeffer did not agree with euthanasia. He wrote:

This is a disturbed life and even if they have to live a very unhappy life, they have to live it as a human life. What if on a ship there will be epidemics of

²⁹ Kuntadi and Indriani Sumadikarya, "Euthanasia dan Penyakit Tak Tersembuhkan serta Pengharapan Kristiani," 288. This simple statistic was made possible with the help of Awi Wangidjaya's LogisSoft, namely the TB and LAI computer programs, which are AF/HarvestSoft products.

disease because several people have infectious diseases, and it is impossible to isolate those who are sick, let alone kill those who are sick.³⁰

Therefore, it is bewildering to follow the thoughts of husband and wife, Kuntadi Sumardikarya, M.Th., the pastor of the GKI (Indonesian Christian Church) Synod of West Java Region and Dr. Indriani K. Sumadikarya who agree with the existence of euthanasia. They say:

We must be more open in cases that have good and serious reasons, for example for those who are dying and suffering, for whom nothing can be done. In such a situation, after praying, purifying the motives and considering deeply the virtues (not just profit and loss), then another alternative can be considered without eliminating the responsibility of faith in God and the legal responsibility to the state.³¹

The author cannot understand why the husband and wife came to such a conclusion? Don't they believe that God can do all miracles to whom God Himself wills? Don't they realize that miracles still work today? Moreover, they connect the act of euthanasia but without eliminating the responsibility of faith in God? This idea is difficult to accept because what humans do, even good deeds, still has to be accounted for their faith in God. Moreover, actions that rebel against God, certainly do not escape the judgment of God. Here it is clear that their faith will be responsible for what they have done. Faith influences a person to do everything. If only someone has faith that is not right before God, of course it produces different values. Therefore Peter invites us to live in true faith – in Jesus Christ – so that with true faith we can live in virtue, knowledge, self-control, perseverance, godliness, which is also true: living in the love of Christ (1 Pet 1:4-7). John Keown, Queens' College, Cambridge said:

Euthanasia makes the law bad, ethics radical, inconsistent with the principles of the sanctity of life. Even the principles established by God have been toyed with. The act of killing which was forbidden by Allah became permissible by law and doctors. The law changes its standard

³⁰ Bonhoeffer, *Ethics* (New York: MacMillan, 1972) 166.

³¹ Kuntadi dan Indriani Sumadikarya, "Euthanasia dan Penyakit Tak Tersembuhkan serta Pengharapan Kristiani," 299.

rules into compromises and doctors change their code of ethics into compromises.³²

In critical situations, who makes the critical decision to disconnect the patient from the life support machine? As a pastoral measure, there are some guidelines I recommend following: *First*, the disease must be incurable - No one should die if we have the means to save his life. If possible, the improvable situation should be improved. Ellen G. White said that, "those who seek healing through prayer should not neglect to use a betterment agent within their reach."³³ Unless the disease process is irreversible, even natural passive euthanasia cannot be justified.

Second, the patient has veto power - If the patient is conscious and rational, then he has veto power over any decision not to prolong his life by artificial means. If the patient is unconscious then all other things being equal, his life wishes on the matter must be respected. If the patient is unconscious and has expressed his wish on the matter previously, then someone else in charge of him must make the decision. In short, then someone else who is responsible for him must make a decision. In short, a representative decision can be made about the procedure.

Third, there must be a collective decision - who should make the decisions when others cannot make them themselves? The Bible says there is wisdom in collective decisions. (Num. 35:30; Proverbs 24:6). Since there are spiritual, legal, moral, and family implications to the decision, it seems wise to consider all aspects. So the decisions should not be made until there is approval from priests, doctors, lawyers, and family members. But even before this - pray. God must be consulted before any decision is contemplated. After all, he is sovereign and supernatural. Perhaps it is his desire to heal, and he is waiting for us to ask (James 4:2; 5:14-15). God is able to perform miracles, and he must be sought first on behalf of the sufferer. But if after earnest and repeated prayer, medical science is not able, nor God willing, to perform miracles, then we must be sure that God's grace is sufficient (2 Corinthians 12:9).

³² John Keown, "Courting Euthanasia?: Tony Bland and the Law Lords," *Ethics & Medicine* 9:3 (1993) 37.

³³ Ellen G. White, *The Ministry of Healing* (Mountain View, CA: Pacific Press, 1942), 231.

F. Conclusion

The results of this study conclude that euthanasia is one of human efforts to make a "good or painless death". There are two types of euthanasia: active and passive. Active euthanasia takes human life and passive euthanasia only allows death to avoid suffering. From a Christian point of view, active euthanasia is morally unjustifiable, but passive euthanasia can be morally justified, as long as it is a natural and irreversible death.

Natural passive euthanasia allows death to occur naturally by resisting extraordinary means of sustaining life, such as heart and lung machines. Natural means for sustaining life include food, water and oxygen. Deliberately withholding these things is unnatural passive euthanasia and is morally unjustifiable from a Christian perspective. Even in morally justifiable natural passive euthanasia, there are still tough decisions. It should be done only when a person is dying and then it is not his wish. Decisions must be made with the consent of pastors, doctors, lawyers, and family. God must be sought first in prayer and healing. And when the path of death is medically irreversible and no divine version has emerged, it is morally justified to stop unnatural attempts to prolong the death process. Although almost 10 years ago euthanasia has been practiced in European countries and even parts of the United States, there are still definite pros and cons. Viewed from the aspect of human rights, this is a moral harassment that needs to be re-evaluated whether euthanasia is true in accordance with human rights values because human rights values essentially reject euthanasia. Also seen from the religious aspect, euthanasia is never justified. The 6th Law of Torah: "You shall not kill" irrevocably means that euthanasia is rejected. God never allowed in either the OT or NT to practice euthanasia. So, the faith of Christ is a faith that values human life as a gift and belongs to God. Humans have no right to destroy, unless God himself wills it.

Bibliography

- J.E. Sahetapy dan Mardjono Reksodipuro, *Parados dalam Kriminologi* Surabaya: Pusat Studi Kriminologi Fakultas Hukum Unair, 1976.
- Moeljatno, *Kitab Undang-undang Hukum Pidana* Yogyakarta: UGM, 1971.
- Kode Etik Kedokteran Indonesia – lampiran III (Declaration of Genewa) oleh Panitia Redaksi Musyawarah Kerja Susila Kedokteran Nasional (Jakarta: Yayasan IDI)
- Dorothy I. Marx, *Itu 'kan Boleh?* Bandung: Klam Hidup, t.t.
- Djoko Prakoso & Djaman Andhi Nirwanto, *Euthanasia Hak Asasi Manusia dan Hukum Pidana*
- Al. Budyapranata pr, *Etika Praktis Berdasarkan Sepuluh Perintah Allah* Yogyakarta: Andi ,1987
- Kuntadi dan Indriani Sumadikarya, “Euthanasia dan Penyakit Tak Tersembuhkan serta Pengharapan Kristiani,” *Penuntun* Vo. 2, No. 7 April-Juni ,1996.
- J. Verkuyl, *Etika Kristen Kapita Selekt*a, Jakarta: Gunung Mulia, 1998.
- Kuntadi dan Indriani Sumadikarya, “Euthanasia dan Penyakit Tak Tersembuhkan serta Pengharapan Kristiani,”
- R. Jay, 1980. *The Nazi Doctors: Medical Killing and Psychology of Genocide* (London: Papermac, 1986
- Heger, *The Men with the Pink Triangle* Boston: Alyson
- D. Kenrick dan G. Puxon, *Destiny of Europe Gypsies*, New York: Basic Books, 1972
- Reuters, “Belanda Sahkan Hak untuk Mati,” *Kompas* 12 April 2011
- Sir Francis Vallat, *An Introduction to the Study of Human Rights* London: Europe, Publication Limited, 1970.
- Muladi, *Hak untuk Mati*, Naskah Diskusi Mingguan Fakultas Hukum Undip, 8 September, 2017.
- John Keown, “Courting Euthanasia?: Tony Bland and the Law Lords,” *Ethics & Medicine*

- Cairus, Aecio, *Doctrine of Man*. Chap. In *The Hand Book of Seventh-day Adventist Theology*, commentary Reverence Series, Vol 12, ed. George W. Reid. Hagerstown, MD: Review & Herald, 2000.
- Berg, Carol, *Euthanasia*, International Encyclopedia of Ethics, ed., John K. Roth (Chicago, IL: Salem Press), 1990.
- Ranaan Billon, "Acts and Omissions: Killing and letting Die," *British Medical Journal* 292 (1986), 126-127, cited by David C. Thomasma and Glan C. Craber, *Euthanasia* (New York: The Continuum Publishing).
- _____, *Euthanasia*. International Encyclopedia of Ethics, ed. John K. Roth. Chicago, IL: Salem Press, 1995.
- Geisler, Norman I, *Ethics: Alternatives and Issues*. Grand Rapids, MI: Zondervan, 1971.
- _____, *Christian Ethics: Options and Issues*. Grand Rapids, MI: Baker, 1989.
- Gloria Cyber Ministries, 2013. *Belgia Izinkan Euthanasia*. <http://www.glorianet.org/berita/b3662.html>. Accessed on February 2, Internet.
- Kartono, Muhammad, *Euthanasia di Indonesia*, 2013.
- Theravada.net/regional/Indonesia/euthanasia/bunuh-diri.html-37k. Accessed in February 5
- Ranann Billon, *Acts and Omissions: Killing and Letting Die*, *British Medical Journal* 292 (1986), 126-127. Cited by David C. Thomasma and Glan C. Craber, *Euthanasia* (New York: The Continuum Publishing). 2015.
- Rendtrorff, Trutz, *Ethics*, trans., Keith Crim. Minneapolis, Minn: Augsburg Fortress, 1989.
- Thielicke, Helmut, *Theological Ethics*, trans., John W. Doberstein. Grand Rapids, MI: Eerdmans, 1964.
- Thiessen, Hendry C, *Lectures in Systematic Theology*. Grand Rapids, MI: Eerdmans, 1949.
- Vyhmeister, Nancy, *Quality Research Papers for Students of Religion and Theology*. Grand Rapids, MI: Zondervan, 2001.
- Wagoman, J. Philip, *Christian Moral Judgement*. Louisville, Kentucky: Westminster Press, 1989.

White, Ellen G, *The Ministry of Healing*. Mountain View, CA: Pacific Press, 1942.