

**The Australian**

# **Test of conviction on a life and death issue**

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**THERE is nothing in the least kitsch or sentimental about the biblical account of Christmas. When Mary went into labour in Bethlehem, there was no room at the inn. When the Magi presented their gifts to the child, along with gold for the infant king and priestly frankincense, there was a vessel of myrrh, a precious oil for anointing the dead.**

Western Christendom has traditionally regarded the Incarnation as so fraught with meaning that it needed to be celebrated over not just one day but eight, a full octave. During the octave, from a liturgical standpoint normal time collapses in on itself and each day counts as Christmas Day.

It is often referred to as the blood octave, because of the bloodshed associated with the feasts that fall during the eight days. The 26th is the feast of Stephen, the first Christian martyr stoned to death. Some days later is the feast of St Thomas A'Beckett, the martyred English archbishop.

In between falls the memorial of Mary's ritual purification after the bloodshed of childbirth and the encounter with the elderly Simeon in the Temple. He greets the Christ-child as the Messiah, with the prophecy that he will be the cause for the fall and the rise of many in Israel and that he will be "a sign of contradiction", and then expires in rapture.

The bloodiest feast of the octave and the earliest fulfilment of Simeon's prophecy of many falling is the Massacre of the Holy Innocents. They were the male children of the district where Christ was born whose deaths Herod had ordered in the hope of killing the Messiah. A sign of contradiction seems to understate the case. What Christians celebrate as the Incarnation has been, for the intervening centuries, coupled with an incomprehensibly brutal exercise of the power of the state, for those among whom it took place.

Nowadays, the feast of the Holy Innocents is often associated with two forms of contemporary state-sanctioned slaughter; abortion and euthanasia. It is unlikely that the issue of abortion will be debated in any Australian parliament this year, but euthanasia will certainly resurface in the South Australian legislature in a few months, thanks to the indefatigable enthusiasm of the Greens.

It's also likely to be the subject of a proxy debate this year in the federal parliament, focusing on the question of whether subordinate territory parliaments in the NT and the ACT should be conceded the power to enact euthanasia legislation. Now seems as good a time as any to venture an opinion.

Euthanasia legislation has always seemed to me a deeply subversive, amoral response to a problem of now nearly negligible proportions. After all, the law no longer prohibits those who want to end their own lives from doing so and there are fool-proof, painless means readily to hand. Of course, those who would have preferred to die rather than be left helpless -- felled by a stroke or other sudden illness -- and whose sufferings are being protracted against their will, deserve our sympathy.

But euthanasia advocates habitually overstate the incidence and gravity of the predicament. In the era of readily available palliative care and circumstances where anyone can easily put on the record their wishes in the matter of resuscitation and end-of-life care, it's hard to imagine that many people currently fall into that category and seems certain that their numbers will dwindle.

Even in those situations, the legal principle is that hard cases make bad law. The undertaking "to do no harm", on which Western medicine is predicated, in most cases precludes doctors from treating their patients in ways that will result in their dying. Euthanasia legislation has the reverse effect, in effect obliging members of the healing profession to dishonour their oath and to become, however reluctantly, executioners.

It doesn't take much imagination to see how adversely that reverse would affect the morale of doctors, to say nothing of the public's waning trust and confidence in the profession over time. Are these fundamentally important public goods to be compromised simply so that a narcissistic generation can be guaranteed a state-sanctioned death-on-demand?

The Dutch experience of euthanasia has much to teach us about a demoralised medical profession. It also points to two other great evils: coercive expectations on the sick and elderly and the trajectory towards the state sanctioning involuntary euthanasia.

It should be obvious that, whenever the state makes the option for euthanasia available, it abandons an ancient obligation to preserve the lives of some at least of its more vulnerable citizens. It also creates a measure of expectation on the part of family and friends that the old and the sick will at some stage consider availing themselves of that option. When the law changes, for better or for worse it informs our governing assumptions about what is acceptable or standard practice.

Anyone who's spent much time with the elderly will know how anxious many of them are not to be a burden and not to erode the legacies of their beneficiaries by way of expensive geriatric care. At a time of increasing life-expectancy, the option of euthanasia is one more way of both metaphorically and literally poisoning intergenerational relations.

From the Dutch experience we can also see how a voluntary process that appeared to be hedged about with protocols has been gradually extended to include people deemed incompetent for one reason or another to make the decision for themselves.

The argument that is likely to find most favour with a markedly pragmatic electorate is that no one has yet designed an adequate set of safeguards that have stood the test of time.

Julia Gillard has publicly embraced that position, which was sensible. Whatever her private view, she knows that she needs legalised euthanasia on her watch like she needs a hole in the head. Even so, how disaffected Labor members and senators who've concluded that Gillard is floundering will end up voting is anybody's guess.

My first prediction for the year is that a grand coalition of the major faiths, assisted by some heavy-weight moral philosophers, will see the campaign against euthanasia as one they can't afford to lose. For a change, it will be adequately funded and professionally run.