NZNO AGM Panel

21st September 2017
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The question

• What do you think are the salient points about assisted dying and the debate on it that you think the nursing profession should consider?
But first: Context

• Ask yourself what is the context of professional nursing practice?
• Is there time to think, question?
Dissonance/constrained practice
The question

• What do you think are the salient points about assisted dying and the debate on it that you think the nursing profession should consider?
• Assisted dying
The problem of language

Established language

• Euthanasia
• Suicide
• Assisted suicide
• Physician assisted suicide

Other established terms

• Killing
• Active euthanasia
• Passive euthanasia
• Voluntary euthanasia
• Involuntary euthanasia

Modified language

• Assisted dying
• Physician aided dying
• Physician-assisted death/dying
• physician aid in dying

Other contemporary terms

• Compassionate caring
• aid-in dying
• dying with dignity
• compassionate dying
Problems with the research!

- Alt.facts, post truth, spin
- Opinion polls (+ve support)
- Surveys
- The problem of bias, suggestion or presumed respectability

But what do results really mean?
- 67% of nurses were supportive (of legalising assisted dying in New Zealand)
- the items in our study included the terms ‘painful’, ‘incurable disease’ and ‘request’, which may have influenced participants to express increased support for euthanasia (Oliver, Wilson & Malpas, 2017).
Motive asymmetry

• Your ideology is motivated by love
• Your ideology is motivated by hate
• Listening to people who agree with you
• Confirmation bias
• Need people to disagree
• Blur the lines
What we need to consider

• Context
• Thinking time
  – What is meant
  – How has the conclusion been reached
  – Who shaped the thinking
  – How could someone else look at it
  – Why is this position better than any other
  – What are the implications and consequences
  – What evidence is there to support assumptions
  – How do we know the evidence is accurate
• Don’t trust our own position too much
Thank you

• Acknowledgements Dr Martin Woods

• References: