Journal of Research in Nursing
2021, Vol. 26(8) 741–742

DOI: 10.1177/17449871211010148
journals.sagepub.com/home/jrn
SAGE

Commentary: The influence of religious/spiritual beliefs on Malaysian hospital healthcare workers' attitudes towards suicide and suicidal patients: a qualitative study

Martin Johnson
Emeritus Professor, School of Health and Society, University of Salford, UK

This study is a most interesting piece of work which arrives at a time when the debate over the legalisation of some approaches to assisted suicide is reaching a higher intensity in some western countries such as Ireland and New Zealand. Indeed, I must confess, in common with 80% of the UK population, that I am broadly in favour of the legalisation of assisted suicide when people face intolerable suffering at the end of life (Wooton and Riley, 2020). In The Netherlands both assisted suicide and euthanasia are legal if there is unbearable suffering and no prospect of improvement. According to Nicola Davis in the UK's *Guardian* newspaper (Davis, 2019), each state has different checks and balances with agreement needed from at least one further independent physician and various criteria being met. Among those countries already with legislation enacted are Belgium, Canada, Columbia and Luxembourg. She argues that assisted suicide, in which the person concerned normally needs to be aware and capable of self-administration of the lethal medicine, is even more widely accepted, with processes available in Switzerland and a number of US states including California, Colorado, Hawaii, New Jersey, Oregon, Washington State, Vermont and the District of Columbia.

It is easy to assume that in countries with a predominance of an orthodox religion (such as Islam, Christianity or Judaism) with strict ordnances against suicide of any kind people would be largely resistant to the idea, but clearly here a significant minority, who tended to be Hindu or Buddhist, were prepared to respect the wishes of the person and their family and take account of unendurable suffering experienced by a dying person. Individuals often express this opinion in both the healthcare context and, potentially, on the battlefield, where ending the suffering of grievously wounded combatants has been commonplace but little acknowledged. Indeed, the tolerance expressed in the interviews by some towards

Corresponding author:
Martin Johnson, School of Health and Society, University of Salford, Manchester, UK.
Email: M.Johnson2@salford.ac.uk

others' different beliefs is refreshing. However, others seemed more committed to their orthodox religious teaching, that suicide or assisted dying would be sinful and would prevent the patient's entry to heaven, even going so far as to offer encouragement to re-commit to their faith as a means of support to avoid suicide.

The discussion, based on their current sample of health workers in Malaysia, allows the authors to conclude that religion and spirituality are major drivers of attitudes to suicide of either type. This may be true at the moment, but it is clear that many states of the USA, despite a relatively strong 'Bible belt', have enabled quite liberal legislation in respect of end-of-life care. Clearly, American attitudes to individual autonomy are able to be dissonant, with religious teaching in some matters of personal choice; not always a good thing, think of their gun laws, but in this case perhaps something for us to learn from.

Of course, the sample here is also including in their thoughts the kind of suicide that is perhaps different, in which the individual is not terminally ill and is choosing suicide as a strategy for overcoming mental health or social or domestic difficulties. Here, even those who feel liberally about euthanasia and assisted suicide would concede that the conflation of these two generally different ideas within the reviewed study is potentially problematic for understanding different cultural viewpoints on the topic, but the study should open a debate about these ideas in a rational and evidence-based way.

References

Davis N (2019) The Briefing. Euthanasia and assisted dying rates are soaring. But where are they legal? 15 July 2019. https://www.theguardian.com/news/2019/jul/15/euthanasia-and-assisted-dying-rates-are-soaring-but-where-are-they-legal (accessed 31 March 2021).

Wooton S and Riley L (2020) Last rights: The case for assisted dyingLondon: Biteback Publishing.

Martin Johnson is currently Emeritus Professor in Nursing at the University of Salford, Greater Manchester, UK and has research interests in end-of-life care, ethics and patient advocacy. He has volunteer and advisory commitments with Lymphoma Action, The Lymphoma Coalition (Europe) and Haemochromatosis UK.