

## Research Papers On Euthanasia

"The book is extremely well balanced: in each section there is usually an argument for and against the positions raised. It is a useful and well-thought-out text. It will make people think and discuss the problems raised, which I think is the editor's main purpose." -- Journal of Medical Ethics "... a volume that is to be commended for the clarity of its contributions, and for the depth it gains from its narrow focus. In places, this is a deeply moving, as well as closely argued, book." -- Times Literary Supplement "This work is an excellent historical and philosophical resource on a very difficult subject." -- Choice "This collection of well-written and carefully argued essays should be interesting, illuminating, and thought provoking for students, clinicians, and scholars." -- New England Journal of Medicine "This book is highly recommended..." -- Pharmacy Book Review "This is a well-balanced collection and the essays are of uniformly good quality.... very readable.... should be useful to anyone interested in this topic." -- Doody's Health Sciences Book Review Home Page "Physician-Assisted Suicide continues in the fine tradition of the Medical Ethics series published by Indiana University Press. Chapters are authored by outstanding scholars from both sides of the debate, providing a balanced, in-depth exploration of physician-assisted suicide along

clinical, ethical, historical, and public policy dimensions. It is important reading for those who want to better understand the complex, multilayered issues that underlie this emotionally-laden topic." -- Timothy Quill, M.D. "Robert Weir has produced the finest collection of essays on physician assisted dying yet assembled in one volume. Physician assisted dying involves ethical and legal issues of enormous complexity. The deep strength of this anthology is its multi-disciplinary approach, which insightfully brings to bear interpretations from history, moral philosophy, religion, clinical practice, and law. This is a subject, much like abortion, that has divided America. This volume provides balanced scholarship that will help inform opinions from the hospital and hospice bedside to the halls of federal and state legislatures and courtrooms." -- Lawrence O. Gostin, Co-Director, Georgetown/Johns Hopkins Program on Law and Public Health "This book is a timely and valuable contribution to the debate. Highly recommended for academic collections." -- Library Journal These essays shed light and perspective on today's hotly contested issue of physician-assisted suicide. The authors were selected not only because of their experience and scholarship, but also because they provide readers with differing points of view on this complex subject -- and a potential moral quandary for us all.

This book discusses thoroughly the major ethical,

legal and clinical issues involved in the euthanasia debate.

Presents a sample research paper on euthanasia, provided by the Sehome High School Library. Notes that the Modern Language Association (MLA) format was used. Links to related sites.

This groundbreaking book uncovers the hidden world of illicit physician-assisted suicide and euthanasia. Through the frank and often troubling first-hand accounts of health professionals who have been involved in assisted death, the book records for the first time this secret but real area of medical and nursing practice. Through face-to-face interviews with these "angels of death," Roger S. Magnusson explores the social practices, relationships, and networks that constitute "underground" euthanasia. How is assisted death actually practiced within health care settings? What are the issues that surround the making of such a momentous decision? How do health care workers justify their attitudes and actions in this area? *Angels of Death* offers detailed answers to these questions and many others. The doctors, nurses, and therapists who were interviewed pseudonymously for this study work in the HIV/AIDS communities in the United States and Australia. Their perspectives and practices, their attitudes and feelings, illuminate the assisted death debate and expose a variety of disturbing issues, including the reality of "botched attempts,"

euthanasia without consent, and unduly hasty measures to bring about death. The testimony of medical practitioners, combined with Magnusson's thoughtful assessment of the issues, will be of intense interest to both opponents and advocates of proposals to legalize euthanasia.

Maintaining dignity for patients approaching death is a core principle of palliative care. Dignity therapy, a psychological intervention developed by Dr. Harvey Max Chochinov and his internationally lauded research group, has been designed specifically to address many of the psychological, existential, and spiritual challenges that patients and their families face as they grapple with the reality of life drawing to a close. In the first book to lay out the blueprint for this unique and meaningful intervention, Chochinov addresses one of the most important dimensions of being human. Being alive means being vulnerable and mortal; he argues that dignity therapy offers a way to preserve meaning and hope for patients approaching death. With history and foundations of dignity in care, and step by step guidance for readers interested in implementing the program, this volume illuminates how dignity therapy can change end-of-life experience for those about to die - and for those who will grieve their passing.

The main strength of this book is that it examines the challenges facing the field of Bioethics today from medical, ethical and legal perspectives. A critical

exchange of ideas from professionals in interdisciplinary fields allows everyone to learn and benefit from the insights gained through others' experiences. Examining, analyzing and understanding these complex medical-ethical-legal issues and cases and how they are resolved will serve as a paradigm for all professionals who will be confronted with these complex bioethical issues now and in the future. The more we face these challenges directly, examine them critically and debate them enthusiastically the more knowledge will be gained and hopefully, we will gain more practical wisdom.

"Argues that people who promote the legalization of euthanasia ignore the vast ethical, legal and social differences between euthanasia and natural death. Permitting euthanasia, Somerville demonstrates, would cause irreparable harm to respect for human life and society." --Cover.

AAP Prose Award Finalist 2018/19 Management of Animal Care and Use Programs in Research, Education, and Testing, Second Edition is the extensively expanded revision of the popular Management of Laboratory Animal Care and Use Programs book published earlier this century. Following in the footsteps of the first edition, this revision serves as a first line management resource, providing for strong advocacy for advancing quality animal welfare and science worldwide, and

continues as a valuable seminal reference for those engaged in all types of programs involving animal care and use. The new edition has more than doubled the number of chapters in the original volume to present a more comprehensive overview of the current breadth and depth of the field with applicability to an international audience. Readers are provided with the latest information and resource and reference material from authors who are noted experts in their field. The book:

- Emphasizes the importance of developing a collaborative culture of care within an animal care and use program and provides information about how behavioral management through animal training can play an integral role in a veterinary health program
- Provides a new section on Environment and Housing, containing chapters that focus on management considerations of housing and enrichment delineated by species
- Expands coverage of regulatory oversight and compliance, assessment, and assurance issues and processes, including a greater discussion of globalization and harmonizing cultural and regulatory issues
- Includes more in-depth treatment throughout the book of critical topics in program management, physical plant, animal health, and husbandry. Biomedical research using animals requires administrators and managers who are knowledgeable and highly skilled. They must adapt to the complexity of rapidly-

changing technologies, balance research goals with a thorough understanding of regulatory requirements and guidelines, and know how to work with a multi-generational, multi-cultural workforce. This book is the ideal resource for these professionals. It also serves as an indispensable resource text for certification exams and credentialing boards for a multitude of professional societies Co-publishers on the second edition are: ACLAM (American College of Laboratory Animal Medicine); ECLAM (European College of Laboratory Animal Medicine); IACLAM (International Colleges of Laboratory Animal Medicine); JCLAM (Japanese College of Laboratory Animal Medicine); KCLAM (Korean College of Laboratory Animal Medicine); CALAS (Canadian Association of Laboratory Animal Medicine); LAMA (Laboratory Animal Management Association); and IAT (Institute of Animal Technology).

This issue of *Veterinary Clinics: Small Animal Practice*, guest edited by Drs. Beth Marchitelli and Tami Shearer, focuses on *Small Animal Euthanasia: Updates on Clinical Practice*. This is one of six issues each year. Articles in this issue include, but are not limited to: historical perspective of euthanasia in veterinary medicine, the science of transitional states of consciousness and euthanasia, the physiology of death, pharmacological methods: an update on optimal pre-sedation and euthanasia solution administration, common and alternative routes of euthanasia solution administration, standardization of data collection to document adverse events associated with euthanasia, factors contributing to the decision to euthanize: diagnoses, clinical signs and triggers,

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euthanasia decision making: a collaboration between pet owners and veterinary professionals, euthanasia from the veterinary client's perspective: psychosocial contributors to euthanasia decision-making, and communication and euthanasia- beyond open ended questions

Academic Paper from the year 2019 in the subject Politics -

International Politics - Topic: Public International Law and Human Rights, grade: B, University of Catania (Department of

Political and Social Sciences), language: English, abstract:

Humans are free by nature. They enjoy right to self-

preservation given the notion that humans themselves are the

owners of their lives. This ownership of life bestows the right

to make decisions on individual life solely on the owner of life;

that is, the right to life and the right to die. As a result,

individuals make decisions on whether their lives worth

continuous existence or not on the basis of their encounter

with the challenges of life, society, and health. To many,

pains, agonies, indignities, and poor health vitiate good life.

Therefore, continuous existence in such a situation debases

the quality of being humans, according to many people. As a

result, euthanasia and/or suicide are at the top of the decision

ladder of such people in the above category. The question of

whether or not individuals have right to end their lives by

themselves or through another is subjected to moral,

philosophical, and societal debates with different literature,

policymakers, and professionals questioning the rationale

behind the decision to end one's life by oneself or through

the help of another person. This paper aims at expanding the

debate by asking whether ownership of life leads to the right

to die.

"This book provides a history of Nazi medical euthanasia

programs, demonstrating that arguments in their favor were

widely embraced by Western medicine before the Third

Reich. Contributors find significant continuities between

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history and current physician-assisted suicide and euthanasia and urge caution about their legalization or implementation"-- Examines the issue of physician-assisted suicide in several articles from a variety of perspectives.

In this book the author makes a case for legalized physician-assisted dying. Using the latest data from Oregon and the Netherlands, he puts a new slant on perennial debate topics such as "slippery slopes," "the integrity of medicine," and "sanctity of life." This book provides an in-depth look at how we die in America today. It examines the shortcomings of our end-of-life system. You will learn about terminal torture in hospital ICUs and about the alternatives: hospice and palliative care. The author scrutinizes the good, the bad, and the ugly. He provides a critique of the practice of palliative sedation. The book makes a strong case that assisted dying complements hospice. By providing both, Oregon now has the best palliative-care system in America. This book, above all, may help you or someone you care about navigate this strange landscape we call "end of life." It can be an informed guide to "a good death" in the age of hospice and high-tech medical intervention.

A consideration of the 'slippery slope' objection to voluntary euthanasia, including a review of the Dutch experience.

In this new addition to the 'Debating Law' series, Emily Jackson and John Keown re-examine the legal and ethical aspects of the euthanasia debate. Emily Jackson argues that we owe it to everyone in society to do all that we can to ensure that they experience a 'good death'. For a small minority of patients who experience intolerable and unrelievable suffering, this may mean helping them to have an assisted death. In a liberal society, where people's moral views differ, we should not force individuals to experience deaths they find intolerable. This is not an argument in favour of dying. On the contrary, Jackson argues that legalisation

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could extend and enhance the lives of people whose present fear of the dying process causes them overwhelming distress. John Keown argues that voluntary euthanasia and physician-assisted suicide are gravely unethical and he defends their continued prohibition by law. He analyses the main arguments for relaxation of the law - including those which invoke the experience of jurisdictions which permit these practices - and finds them wanting. Relaxing the law would, he concludes, be both wrong in principle and dangerous in practice, not least for the dying, the disabled and the disadvantaged.

Examines the use of euthanasia and assisted suicide that have been in common practice in the Netherlands for more than twenty years and explores the ramifications of legalizing euthanasia for patients, their families, and medical practitioners.

This book addresses key historical, scientific, legal, and philosophical issues surrounding euthanasia and assisted suicide in the United States as well as in other countries and cultures.

- Addresses the extended history of debates regarding the ethical justifiability of assisted suicide and euthanasia
- Analyzes assisted suicide and euthanasia in many cultural, philosophical, and religious traditions
- Provides an interdisciplinary perspective on the subject, including coverage of topics such as the depictions of assisted dying in popular culture, that enables a more complete understanding of the emotionally charged controversy surrounding this subject
- Spotlights the latest medical and scientific developments in euthanasia and examines the role of technology in the ethical debates on assisted dying

Physician-Assisted Suicide: What are the Issues? offers

a detailed discussion of recent supreme court rulings that have had an impact on the contemporary debate in the United States and elsewhere over physician-assisted suicide. Two rulings by the U.S. Supreme Court have altered the contemporary debate on physician-assisted suicide: *Washington v. Glucksberg* (1997) and *Vacco v. Quill* (1997). In these cases, the Supreme Court ruled that state laws could prohibit assisted suicide and, therefore, physician-assisted suicide. These rulings mark the apex of over two decades of unprecedented litigation regarding end-of-life care and signal the beginning of a new clinical, ethical, and legal debate over the extent of an individual's rights to control the timing, manner, and means of his/her death. The debate over suicide and assisting suicide is ancient and contentious and intertwined with questions about the permissibility of voluntary active euthanasia or mercy killing. Responses to these issues can be divided into those who defend physician-assisted suicide and many of these other activities and those who object. But those who object may do so on principled grounds in that they regard these activities as wrong in all cases, or non-principled, in that they believe there are more prudent, less disruptive or more efficient policies. The authors in this book sort out these responses and look at the assumptions underlying them. Several of these authors give startling new interpretations that a culture gap, deeper and wider than that in the abortion debate, exists. Clear guidelines on the proper care and use of laboratory animals are being sought by researchers and members of the many committees formed to oversee animal care

at universities as well as the general public. This book provides a comprehensive overview of what we know about behavior, pain, and distress in laboratory animals. The volume explores: Stressors in the laboratory and the animal behaviors they cause, including in-depth discussions of the physiology of pain and distress and the animal's ecological relationship to the laboratory as an environment. A review of euthanasia of lab animals--exploring the decision, the methods, and the emotional effects on technicians. Also included is a highly practical, extensive listing, by species, of dosages and side effects of anesthetics, analgesics, and tranquilizers.

After assessing the strengths and weaknesses of arguments for assisted suicide and euthanasia, Gorsuch builds a nuanced, novel, and powerful moral and legal argument against legalization, one based on a principle that, surprisingly, has largely been overlooked in the debate; the idea that human life is intrinsically valuable and that intentional killing is always wrong. At the same time, the argument Gorsuch develops leaves wide latitude for individual patient autonomy and the refusal of unwanted medical treatment and life-sustaining care, permitting intervention only in cases where an intention to kill is present.

Internationally renowned lawyer and philosopher Ronald Dworkin addresses the crucially related acts of abortion and euthanasia in a brilliantly original book that examines their meaning in a nation that prizes both life and individual liberty. From *Roe v. Wade* to the legal battle over the death of Nancy Cruzan, no issues have

opened greater rifts in American society than those of abortion and euthanasia. At the heart of Life's Dominion is Dworkin's inquest into why abortion and euthanasia provoke such controversy. Do these acts violate some fundamental "right to life"? Or are the objections against them based on the belief that human life is sacred? Combining incisive moral reasoning and close readings of individual court decisions with a majestic interpretation of the U.S. Constitution itself, Dworkin gives us a work that is absolutely essential for anyone who cares about the legal status of human life.

The Dutch experience has influenced the debate on euthanasia and death with dignity around the globe, especially with regard to whether physician-assisted suicide and euthanasia should be legitimized or legalized. A review of the literature reveals complex and often contradictory views about the Dutch experience. Some claim that the Netherlands offers a model for the world to follow; others believe that the Netherlands represents danger, rather than promise, and that the Dutch experience is the definitive answer regarding why we should not make active euthanasia and physician-assisted suicide part of our lives. Given these contradictory views, it has become clear that fieldwork is essential to developing a more informed opinion. Having investigated the Dutch experience for a number of years, and after thoroughly reading the vast literature published in English, I went to the Netherlands for one month in the summer of 1999 to get a feel for the local situation. I felt that this would provide the basis on which I could better interpret the findings of the available literature. I visited

the major centers of medical ethics, as well as some research hospitals, and spoke with leading figures in the euthanasia policy and practice. The time spent was extremely beneficial and enriching. I followed in the footsteps of Carlos Gomez, who published a book following one month of extensive research in the Netherlands.

Physician-assisted Suicide and Euthanasia Before, During, and After the Holocaust

The extensively updated and revised third edition of the bestselling *Social Medicine Reader* provides a survey of the challenging issues facing today's health care providers, patients, and caregivers by bringing together moving narratives of illness, commentaries by physicians, debates about complex medical cases, and conceptually and empirically based writings by scholars in medicine, the social sciences, and the humanities.

Volume 1, *Ethics and Cultures of Biomedicine*, contains essays, case studies, narratives, fiction, and poems that focus on the experiences of illness and of clinician-patient relationships. Among other topics the contributors examine the roles and training of professionals alongside the broader cultures of biomedicine; health care; experiences and decisions regarding death, dying, and struggling to live; and particular manifestations of injustice in the broader health system. The Reader is essential reading for all medical students, physicians, and health care providers.

For thirty years, Peter Singer's *Practical Ethics* has been the classic introduction to applied ethics. For this third edition, the author has revised and updated all the

chapters and added a new chapter addressing climate change, one of the most important ethical challenges of our generation. Some of the questions discussed in this book concern our daily lives. Is it ethical to buy luxuries when others do not have enough to eat? Should we buy meat from intensively reared animals? Am I doing something wrong if my carbon footprint is above the global average? Other questions confront us as concerned citizens: equality and discrimination on the grounds of race or sex; abortion, the use of embryos for research and euthanasia; political violence and terrorism; and the preservation of our planet's environment. This book's lucid style and provocative arguments make it an ideal text for university courses and for anyone willing to think about how she or he ought to live.

Peeling back the lid on the controversies surrounding mercy killing in the U.S., this full history of the nation's euthanasia movement retraces the history of this recent and controversial ideology.

In this book, a global panel of experts considers the international implications of legalised euthanasia based on experiences from Belgium.

When the end of life makes its inevitable appearance, people should be able to expect reliable, humane, and effective caregiving. Yet too many dying people suffer unnecessarily. While an "overtreated" dying is feared, untreated pain or emotional abandonment are equally frightening. *Approaching Death* reflects a wide-ranging effort to understand what we know about care at the end of life, what we have yet to learn, and what we know but do not adequately apply. It seeks to build understanding

of what constitutes good care for the dying and offers recommendations to decisionmakers that address specific barriers to achieving good care. This volume offers a profile of when, where, and how Americans die. It examines the dimensions of caring at the end of life: Determining diagnosis and prognosis and communicating these to patient and family. Establishing clinical and personal goals. Matching physical, psychological, spiritual, and practical care strategies to the patient's values and circumstances. Approaching Death considers the dying experience in hospitals, nursing homes, and other settings and the role of interdisciplinary teams and managed care. It offers perspectives on quality measurement and improvement, the role of practice guidelines, cost concerns, and legal issues such as assisted suicide. The book proposes how health professionals can become better prepared to care well for those who are dying and to understand that these are not patients for whom "nothing can be done." This book explores the ways in which statistical models, methods, and research designs can be used to open new possibilities for APC analysis. Within a single, consistent HAPC-GLMM statistical modeling framework, the authors synthesize APC models and methods for three research designs: age-by-time period tables of population rates or proportions, repeated cross-section sample surveys, and accelerated longitudinal panel studies. They show how the empirical application of the models to various problems leads to many fascinating findings on how outcome variables develop along the age, period, and cohort dimensions.

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Document from the year 2018 in the subject Medicine - Medical Frontiers and Special Areas, grade: 1, Egerton University, language: English, abstract: Euthanasia is commonly known as mercy killing or assisted suicide because the involved procedures are designed in such a way that, the patient's dignity is not degraded or compromised. Euthanasia has aroused unprecedented debate in the society because it involves several considerations; the most significant one's being practical, religious and ethical issues. Moreover, this practice seems to be somehow challenging to the health professionals, since it is not in alignment with the medical ethics nor legal framework. Euthanasia is illegal in the United Kingdom: thus, it is considered illegal. Therefore, approaches towards euthanasia require caution, since it can lead to imprisonment (Nicholson, 2000). For instance, voluntary euthanasia is considered as a crime in the United Kingdom, which is punishable by law. Any individual who deliberately executes euthanasia is subjected to serve a jail term. Therefore, this research paper will give an overview of euthanasia. Euthanasia has evoked unprecedented controversy in the society.

Polemical Paper from the year 2017 in the subject Medicine - Medical Frontiers and Special Areas, grade: 1, Egerton University, language: English, abstract: Euthanasia is seemingly raising numerous agonizing ethical dilemmas. Therefore, this research paper will critically analyze the ethical aspects of euthanasia. Euthanasia refers to the termination of a terminally ill patient's life. It is executed at an individual's consent especially when someone is suffering from an incurable

health condition. In addition, the decision to terminate a patient's life can also be made by the patient's relatives, the court of law or medical practitioners. However, it is worth noting that the decision by the relatives, the court or the medics is only reached at if the patient is critically ill, such that he or she cannot think or reason. Euthanasia is commonly known as mercy killing or assisted suicide because all the suicide procedures are designed in such a way that, the patient's dignity is not degraded or compromised. The Greeks termed it as euthanatos which simply meant easy death. Some individuals who are not terminally ill can sign consent for their lives to be terminated through euthanasia because of ethical reasons especially with matters related to human dignity, but this happens on rare occasions. However, euthanasia has aroused unprecedented debate in the society because it involves several considerations; the most significant one's being practical, religious and ethical issues. Moreover, this practice seems to be somehow challenging to the health professionals, since it is not in alignment with the medical ethics nor legal framework. Euthanasia is illegal in the United Kingdom: thus, it is considered illegal. Therefore, approaches towards euthanasia require caution, since it can lead to legal repercussions. For instance, voluntary euthanasia is considered as a crime in the United Kingdom, which is punishable by law. Any individual who deliberately executes euthanasia is subjected to serve a jail term.

The question of whether and under what circumstances terminally ill patients should be able to access life-ending

medications with the aid of a physician is receiving increasing attention as a matter of public opinion and of public policy. Ethicists, clinicians, patients, and their families debate whether physician-assisted death ought to be a legal option for patients. While public opinion is divided and public policy debates include moral, ethical, and policy considerations, a demand for physician-assisted death persists among some patients, and the inconsistent legal terrain leaves a number of questions and challenges for health care providers to navigate when presented with patients considering or requesting physician-assisted death. To discuss what is known and not known empirically about the practice of physician-assisted death, the National Academies of Sciences, Engineering, and Medicine convened a 2-day workshop in Washington, DC, on February 12-13, 2018. This publication summarizes the presentations and discussions from the workshop.

Noblit and Hare propose a method - meta-ethnography - for synthesizing from qualitative, interpretive studies. They show that ethnographies themselves are interpretive acts, and demonstrate that by translating metaphors and key concepts between ethnographic studies, it is possible to develop a broader interpretive synthesis.

A riveting, incisive, and wide-ranging book about the Right to Die movement, and the doctors, patients, and activists at the heart of this increasingly urgent issue. More states and countries are passing right-to-die laws that allow the sick and suffering to end their lives at pre-planned moments, with the help of physicians. But even

where these laws exist, they leave many people behind. *The Inevitable* moves beyond margins of the law to the people who are meticulously planning their final hours—far from medical offices, legislative chambers, hospital ethics committees, and polite conversation. It also shines a light on the people who help them: loved ones and, sometimes, clandestine groups on the Internet that together form the “euthanasia underground.” Katie Engelhart, a veteran journalist, focuses on six people representing different aspects of the right to die debate. Two are doctors: a California physician who runs a boutique assisted death clinic and has written more lethal prescriptions than anyone else in the U.S.; an Australian named Philip Nitschke who lost his medical license for teaching people how to end their lives painlessly and peacefully at “DIY Death” workshops. The other four chapters belong to people who said they wanted to die because they were suffering unbearably—of old age, chronic illness, dementia, and mental anguish—and saw suicide as their only option. Spanning North America, Europe, and Australia, *The Inevitable* offers a deeply reported and fearless look at a morally tangled subject. It introduces readers to ordinary people who are fighting to find dignity and authenticity in the final hours of their lives.

In *The Case against Assisted Suicide: For the Right to End-of-Life Care*, Dr. Kathleen Foley and Dr. Herbert Hendin uncover why pleas for patient autonomy and compassion, often used in favor of legalizing euthanasia, do not advance or protect the rights of terminally ill patients. Incisive essays by authorities in the fields of

medicine, law, and bioethics draw on studies done in the Netherlands, Oregon, and Australia by the editors and contributors that show the dangers that legalization of assisted suicide would pose to the most vulnerable patients. Thoughtful and persuasive, this book urges the medical profession to improve palliative care and develop a more humane response to the complex issues facing those who are terminally ill.

The moral issues involved in doctors assisting patients to die with dignity are of absolutely central concern to the medical profession, ethicists, and the public at large. The debate is fuelled by cases that extend far beyond passive euthanasia to the active consideration of killing by physicians. The need for a sophisticated but lucid exposition of the two sides of the argument is now urgent. This book supplies that need. Two prominent philosophers, Gerald Dworkin and R. G. Frey present the case for legalization of physician-assisted suicide. One of the best-known ethicists in the US, Sissela Bok, argues the case against.

This book considers how the termination of life might be accepted in the view of a general obligation to protect life. It features more than 10 papers written by scholars from 14 countries that offer international comparative empirical research. Inside, readers will find case studies from such areas as: India, Chile, Germany, Italy, England, Palestine, Lithuania, Nigeria, and Poland. The papers focus on three limitations of the right to life: the death penalty, abortion, and euthanasia. The contributors explore how young people understand and evaluate the right to life and its limitations. The book

presents unique empirical research among today's youth and reveals that, among other concepts, religiosity matters. It provides insight into the acceptance, perception, and legitimation of human rights by people from different religious and cultural backgrounds. This investigation rigorously tests for inter-individual differences regarding political and judicial rights on religious grounds, while controlling for other characteristics. It will help readers better understand the many facets of this fundamental, yet controversial, philosophical question. The volume will be of interest to students, researchers, as well as general readers searching for answers.

This book describes the way assisted death -- physician-assisted suicide and/or voluntary euthanasia - functions in the Netherlands, Belgium, Switzerland and the state of Oregon - and states the lessons that can be drawn from this experience.

Experts analyze death-related issues and policies in twelve countries, discussing health care costs, advance directives, pain management, cultural, social, and religious factors, and other topics.

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