

PRESS RELEASE



A press release from Family Life International, New Zealand

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New Massey University survey about euthanasia fails to ask pertinent questions

Family Life International says that a just released survey from Massey University about euthanasia lacks validity because of the questions it fails to ask.

Participants in the Massey Survey were asked the following question:

“Suppose a person has a painful incurable disease. Do you think that doctors should be allowed by law to end the patient’s life if the patient requests it?”

They were also asked a second question relating to the same patient scenario, but the second question had someone else administering the lethal injection to the patient instead of a doctor.

Predictably, the majority of survey respondents said “yes” to both questions (70% said “yes” to the first question and 52% said “yes” to the second question)

The problem with these questions is that they assume far too much about public awareness of patient pain management issues and they fail to ask other important questions - as a result the survey findings cannot be considered definitive.

Experts are clear that more than 98% of patient pain can be adequately managed if medical staff are properly trained and properly resourced, but it is doubtful that many of the people who participated in the Massey euthanasia survey were aware of this important fact.

A more meticulous survey about euthanasia would have also asked participants if they were aware that more than 98% of patient pain can be adequately managed if medical staff have proper training and resourcing, and it would have also included other questions about their support for euthanasia in different patient scenarios, such as conditions without pain, or patients suffering psychological pain like depression.

The problem with this survey is that its results cannot be considered definitive, as they suggest a public support for broadly legalised euthanasia when in actual fact participants may have only been in favour of euthanasia in very rare and narrowly defined patient scenarios, such as the situation where patient pain cannot be adequately treated.

Alternatively, the support for legalised euthanasia from the participants in this survey may have been biased in one direction because the majority of participants lacked important knowledge about patient pain care, which is something that the survey did not ascertain.

It is unfortunate to see yet another public survey about euthanasia that fails to ask important questions of its participants before publically proclaiming its findings as authoritative.

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