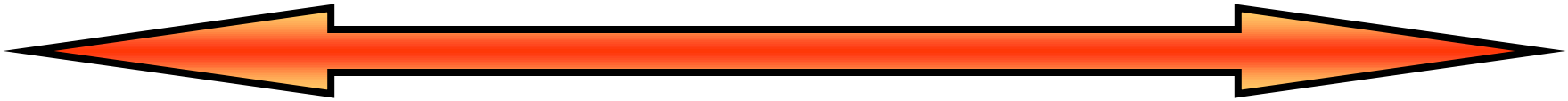
Right to Die Issues

Decide where your personal values fit the continuum below:

When does a person have a right to take their own life?*



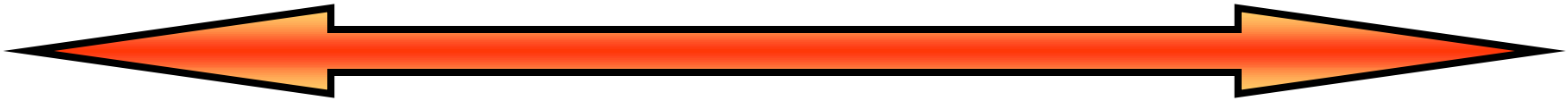
1	2	3	4
NEVER	RARELY	SOMETIMES	ANYTIME

*There is no right or wrong answer to this question!

Right to Die Issues

What is your rationale for selecting your position?

When does a person have a right to take their own life?*



1	2	3	4
NEVER	RARELY	SOMETIMES	ANYTIME

Quotes of those supporting: NEVER

- "Only God can give life, and only God should take it away!"
- "I don't want to burn in hell and I sure do not want my client to either!"
- "Suicide is a selfish act and has traumatic and terrible consequences for loved ones left behind!"
- "Parents who commit suicide leave a terrible legacy for their children!"

Quotes of those supporting: RARELY

- "When someone is suffering with a painful, terminal illness, they should have the right to die!"
- "When clients have expressed an advanced directive, life saving interventions should not be applied."
- "If someone is on life support and brain dead with no chance of recovery, family should be allowed to end life support."

Quotes of those supporting: SOMETIMES

- "If someone who wants to die is not clinically depressed, why should s/he be forced to go on living!"
- "If someone is not depressed and has carefully analyzed their life situation and chooses to die, who has the right to prevent him/her from acting on this personal choice?"

Quotes of those supporting: ANYTIME

- It's my life, mine alone, so I have the right to decide when, where, and how I will end it.
- Many folks think this is the position of Dr. Jack Kevorkian ("Dr Death") and the Hemlock Society, when in fact they support suicide only when there is a terminal illness present, the patient is in pain, and death is imminent.

NASW Code of Ethics

- There is no specific statement in the code about a social worker's responsibility to suicidal clients
- Under a social worker's responsibility to promote client self-determination there is a limit imposed when clients seek to do harm to themselves and others.
- There is also a limit placed on confidentiality. Workers are expected to break confidence when clients express an interest in harming self or others.

NASW Position on Assisted Suicide

- Proscription - Regardless of client's condition, social workers must not help a client commit suicide
  - cannot help a client obtain the means to die
  - cannot pull a plug on a life support system
- Prescription - Social worker should help family members participate in any end of life decision regarding a terminally ill client

Personal vs. Professional Position on Suicide

- Many factors (religious beliefs, life experience, cultural factors) influence one's position on suicide.
- Can a social worker, who strongly believes that suicide is acceptable, work effectively with a suicidal client whose life is filled with trauma, severe disabilities, and few opportunities?
- Should the social work profession have a litmus test on a worker's attitude toward suicide?

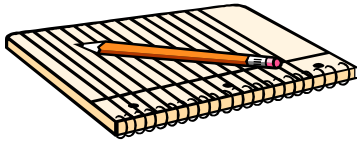
Professional Responsibility

- "While some philosophers may endorse some forms of suicide, such as among the terminally ill or chronically suffering, there is no debate or disagreement among the mental health community that acting to preserve life is an ethical responsibility and an activity consistent with the ethical values in the helping professions." (Fremouw, Perczel, & Ellis, 1990, p. 3)

Malpractice Considerations



- Malpractice claims arise when workers do not take time to assess and take actions to prevent suicide in their clients.
- Suicide assessment and intervention must be carefully documented at the time they first arise with a client -- not in after-the-fact notes.



- Suicidal ideation by any client in a worker's caseload must be taken seriously.
- Dumping clients who express suicidal ideation does not remove the worker's responsibility.

SUMMARY

- NASW's Code of Ethics has no statement on our responsibility to suicidal clients

- The Code imposes limits on promoting self-determination and confidentiality when the client seeks to harm themselves

- We cannot assist clients in killing themselves no matter what there life circumstances may be.

- For ethical and malpractice reasons, we must work to preserve life and prevent suicide in clients.

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