

WHO



Topic A: "Euthanasia focusing into the Right to the Life as the Main Right: Medical, and Social Implications in Modern Healthcare".

UNDERSECRETARY:

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MODERATOR:

**Paula
Pérez**

CHAIR:

**Maríajosé
Armada**





Welcoming letter

Dear delegates,

Welcome to this edition of Colegio's Fontanar Model of the United Nations. We are very excited to have you at the World Health Organization, thank you for choosing this committee.

In this committee, we will talk about Euthanasia, focusing on the right to life as the fundamental right, and we will address the lack of vaccination for polio of children at Gaza, its devastating impact, and the increasing death toll resulting from this preventable disease.

We are confident that each of you will bring unique perspectives and insights to the table, and we look forward for productive and engaging sessions.

Best of luck to all of you, and we wish you a successful experience at this Model of the United Nations.

Sincerely,

Paula Pérez and Maríajosé Armada

Moderator and Chair of WHO



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I. Committee Background

The World Health Organization (WHO), founded in 1948, is a United Nations agency dedicated to combat disease and promote global health.

WHO collaborates with 194 member states worldwide to tackle a wide range of health challenges, including infectious diseases, maternal and child health, and environmental health. WHO's primary focus is to improve global health outcomes, respond to healthcare crises, and assist countries in achieving the Sustainable Development Goals. Some of the key situations WHO has contributed to, include the response to the COVID-19 pandemic, the Pandemic Treaty aimed at preventing future pandemics, the Hub for Pandemic and Epidemic Intelligence to respond to health emergencies, mental health initiatives, among others.

II. Introduction to the Topic

Euthanasia is the practice of intentionally ending a life to relieve pain and suffering, and has long been a subject of ethical, legal, and philosophical debate. At its core, the issue raises profound questions about the right to life a fundamental human right enshrined in international law and many national constitutions.

The World Health Organization (WHO) recognizes the right to life as the foundation of all other human rights, highlighting the importance of protecting individuals' dignity, autonomy, and health.

In the context of modern healthcare, euthanasia presents complex medical and social implications that challenge existing healthcare systems and ethical norms.

While proponents argue that euthanasia offers a compassionate solution to end the suffering of terminally ill patients, opponents contend that it constitutes an attack on the fundamental right to life, potentially eroding public trust in the medical profession and healthcare institutions.

The practice also raises significant ethical questions about the role of healthcare providers in preserving life versus relieving suffering, as well as concerns about vulnerable populations, such as the elderly, people with disabilities, or those with mental health conditions, who may be at risk of coercion or undue pressure.

III. Evolution of the Topic

Euthanasia, or the intentional ending of life to relieve suffering, has evolved significantly throughout history, shaped by cultural, philosophical, and medical perspectives.

In ancient times, concepts of voluntary death were accepted in certain cultures, but as ethical views emphasizing the dignity of life took hold, euthanasia became widely condemned. In more recent centuries, as medicine advanced and life-prolonging technologies emerged, the ethical debate shifted.

The increasing ability to extend life raised questions about when it should end, especially, in cases of terminal illness or unmanageable pain. The idea of personal autonomy began to gain importance, with growing recognition of individuals' right to make decisions about their own lives.

By the late 20th and early 21st centuries, several countries legalized euthanasia under strict conditions, while others continued prohibiting it.

The rise of palliative care, which focuses on alleviating suffering without hastening death, , further complicating the debate by offering an alternative approach that manages pain without directly causing death. Today, euthanasia remains a divisive issue, with some advocating for individual rights and compassion, while at the other side the dignity and right of life and the risks of abuse are important matters.

The World Health Organization (WHO) remains focused on promoting palliative care and the medical aspects of end-of-life care. Meanwhile, the debate surrounding euthanasia's role in healthcare systems continues to evolve, seeking to balance individual autonomy with the ethical considerations around life and death.

IV. Relevant Events

A. Panorama

- 1960s-1970s: The modern debate on euthanasia began as medical technology advanced, raising ethical questions about when life should be ended, especially in cases of terminal illness. The "Right to Die" movement gained momentum, influenced by high-profile cases like Karen Ann Quinlan, who was kept on life support despite being in a persistent vegetative state.
- 1990s: The Netherlands became the first country to legalize euthanasia, setting a precedent for others. Dr. Jack Kevorkian in the U.S. gained attention for assisting in euthanasia, prompting further debate about physician involvement and patient rights.

- 2000s: Belgium legalized euthanasia in 2002, followed by expanding laws in countries like Canada (2016) and Spain (2021), recognizing euthanasia as a legal option under strict medical guidelines.
- 2015-2021: Several U.S. states, including Oregon, Washington, and California, legalized physician-assisted suicide. Global debates continued, with countries like Luxembourg and Spain enacting laws, while WHO emphasizes on palliative care as a crucial alternative to euthanasia.

B. Points of View

United States: Approximately 71% of the population supports the legalization of euthanasia. Public opinion generally favors euthanasia more than physician-assisted suicide, despite both leading to the termination of life.

Until August 2024, euthanasia was not legal in the United States. However, physicians were permitted to withhold or withdraw life-sustaining treatment from terminally ill patients with no reasonable expectation of recovery, which could ultimately lead to their death. (Yi, R., 2024)

China: At this country there are no laws rewarding euthanasia nor medical-assisted suicide, which has led to a space of confusion, their ancient cultural context & culture, modern society, and its diversity can clash, provoking it to be a hard topic, and they do not have a clear position about it (Liu, G., & Liu, K., 2024)

United Kingdom: In the UK, euthanasia remains illegal. The nation recognizes that it involves ending someone's life, and the maximum penalty for assisting in suicide is life imprisonment (NHS., 2023).

France: In France, both explicit euthanasia and assisted suicide are illegal. However, the country has a policy that allows doctors to provide palliative care that may significantly shorten a terminally ill patient's life, even if the intention is not to directly cause death. This process can involve the administration of high doses of pain medication, which can ultimately result in the patient's death, albeit through a lengthy process. (AFP., & Monde, L., 2024)."

Russia: Euthanasia is illegal in Russia. However, according to a VCIOM survey, almost half of the population supports legalizing euthanasia, while 18% are unsure. Only one-third of the population opposes legalization, citing religious beliefs, the conviction that death should occur naturally, and the view that euthanasia constitutes homicide. In this country, young people are less informed about the topic compared to older people. (TASS., 2024).



V. UN and External Actions

A. UN Actions:

The United Nations, through agencies like WHO, focuses on promoting palliative care and improving end-of-life options, emphasizing pain management and dignity for terminally ill patients.

- The UN Human Rights Council upholds the right to life and calls for policies that protect vulnerable populations while respecting informed consent and autonomy.
- The World Health Organization also works to reduce barriers of pain relief medications and advocates for non-lethal alternatives to euthanasia.

B. External Actions:

- Legislation: Several countries have legalized euthanasia, such as the Netherlands,

Belgium, Canada, and Spain, with strict criteria to ensure patient consent and prevent abuse.

- **NGO Advocacy:** Organizations like Dying with Dignity International, and Compassion & Choices, work to legalize euthanasia and support patients autonomy, while others like the European Association for Palliative Care (EAPC) promote palliative care as an alternative.
- **Public Debate:** Countries continue to debating euthanasia, with laws evolving based on public opinion, ethical considerations, and cultural factors.
- **Global Efforts:** Organizations like the World Palliative Care Alliance (WPCA) work to expand palliative care access globally, ensuring that people in low and middle income countries have alternatives to euthanasia.

VI. Conclusion

Euthanasia is a complex issue with profound ethical, healthcare, legal, and human rights implications. The debate has evolved significantly over time, with varying legal frameworks emerging across countries. While some jurisdictions have legalized euthanasia under strict conditions, others prioritize expanding palliative care and improving end-of-life support as alternatives.

International organizations like the UN and WHO emphasize the importance of dignity in dying and advocate for high-quality palliative care as a fundamental component of healthcare systems. The UN and various countries, along with NGOs, have played crucial roles in advancing policies that either regulate or prohibit euthanasia, with a focus on patient autonomy, informed consent, and the protection of vulnerable groups.

Addressing this complex issue requires a multi-faceted approach, including legislative action, international cooperation, and the strengthening of healthcare systems to ensure that individuals at the end of life receive the care and support they need. This includes comprehensive pain management and access to high-quality palliative care, while respecting individual autonomy and dignity.

It is important to note that while the protection of life is a fundamental human right, the ethical considerations surrounding end-of-life care are complex and require careful consideration. The focus should be on ensuring that individuals have the right to make informed decisions about their own care, while also receiving compassionate and supportive care during their final stages of life."**

VII. Committee Focus

- What measures can be taken to expand access to high-quality palliative care and pain management, especially in underserved or rural areas, as an alternative to euthanasia?
- How can international collaboration and coordination be enhanced to ensure that patients in countries with or without legalized euthanasia have access to appropriate end-of-life care focused on dignity?
- What role can the UN and other international organizations play in promoting ethical guidelines and best practices for end-of-life care, particularly in countries with differing cultural and religious perspectives on euthanasia?

- How can public awareness campaigns be effectively designed to address the social and ethical debates surrounding euthanasia, fostering better understanding of the issues while respecting individual autonomy and cultural values?
- How can the committee get to show and convince the international authorities, as well as the citizens, that the fundamental right to life without exceptions should always be respected?

VIII. Participation List

- Arab Republic of Egypt
- Commonwealth of Australia
- Federal Republic of Germany
- French Republic
- Hashemite Kingdom of Jordan
- Italian Republic
- Kingdom of Belgium
- Kingdom of Saudi Arabia
- Kingdom of Spain
- Lebanese Republic
- People's Republic of China
- Republic of Colombia
- Republic of Iraq
- Republic of Korea
- Republic of Turkey
- Russian Federation
- State of Israel
- State of Qatar
- United Kingdom of Great Britain and Northern Ireland
- United States of America

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