

**Public Opinion of Euthanasia and its Legalization in Taiwan: Basic Human Rights or Murder**

By

**Mayer Lai**

賴冠維

Submitted to the Faculty of  
Department of International Affairs in partial fulfillment  
of the requirements for the degree of  
Bachelor of Arts in International Affairs

Wenzao Ursuline University of Languages  
2021

WENZAO URSULINE UNIVERSITY OF LANGAUGES  
DEPARTMENT OF INTERNATIONAL AFFAIRS

This senior paper was presented

by

Mayer Lai  
賴冠維

It was defended on

November 28<sup>th</sup>, 2020

and approved by

Reviewer 1: Ren-Her Hsieh, Associate Professor, Department of International Affairs

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewer 2: Shao-Tzu Wu, Assistant Professor, Department of International Affairs

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor: Mark Lai, Associate Professor, Department of International Affairs

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Copyright © by Mayer, Lai 賴冠維

2021

# **Public Opinion of Euthanasia and its Legalization in Taiwan: Basic Human Rights or Murder**

Mayer, Lai, B.A.

Wenzao Ursuline University of Languages, 2021

## **Abstract**

In the modern society, the issue of “Euthanasia” has been very controversial these days. When it comes to quality and length, which one will be chosen? In this research, the researcher will find out what are the general opinions that how do public think about euthanasia. Moreover, what kind of policy can government do in the future as if it really legalized?

This research found out the reasons that would influence public opinions on euthanasia through the literature review, and uses survey to collect data. The researcher collected data by using Google Form and collected 291 respondents in the end. Finally, the researcher will use STATA to analysis it.

In this research, researcher find out that most people think that euthanasia isn't equivalent to suicide and also euthanasia is a kind of relief to patients. At the same time, people are worried about euthanasia might be abused if it were legalized. In addition, people who agree with euthanasia also think that euthanasia should be legalized in Taiwan. So, the most important in this part is government should set up the corresponding policies or systems, and government need to clarify where the standard is.

Key words: Euthanasia, Physician-Assisted Suicide, Human Right, Murder.

## TABLE OF CONTENTS

<b>INTRODUCTION.....</b>	<b>1</b>
Background.....	1
Motivation.....	2
Research Purpose .....	3
Research Questions .....	3
Contribution .....	3
Limits and Delimits.....	3
<b>LITERATURE REVIEW .....</b>	<b>5</b>
<b>History Background .....</b>	<b>5</b>
<b>The Definition of Euthanasia .....</b>	<b>6</b>
<b>Classification of Euthanasia .....</b>	<b>7</b>
<b>Facts.....</b>	<b>8</b>
<b>Legal Countries .....</b>	<b>9</b>
<b>Current situation in Taiwan.....</b>	<b>10</b>
<b>Argument/Debates.....</b>	<b>10</b>
<b>Supporters .....</b>	<b>11</b>
<b>Opponents.....</b>	<b>12</b>
<b>METHODOLOGY.....</b>	<b>15</b>
<b>Research design .....</b>	<b>15</b>
<b>Data Collection .....</b>	<b>16</b>
<b>DATA ANALYSIS .....</b>	<b>18</b>
<b>Descriptive Statistics .....</b>	<b>18</b>
<b>The General Public Opinion of Patient Autonomy .....</b>	<b>20</b>
<b>The Comparative Between Euthanasia and Suicide.....</b>	<b>24</b>
<b>The Public Opinion of Euthanasia.....</b>	<b>26</b>
<b>Acceptance of Euthanasia .....</b>	<b>30</b>
<b>CONCLUSION AND SUGGESTION.....</b>	<b>35</b>

<b>Appendix 1</b> .....	錯誤! 尚未定義書籤。
<b>Appendix 2</b> .....	<b>37</b>
<b>BIBLIOGRAPHY</b> .....	<b>39</b>

## LIST OF FIGURES

Figure 1. Autonomy-Q1 .....	21
Figure 2. Autonomy-Q2 .....	22
Figure 3. Autonomy-Q3 .....	22
Figure 4. Autonomy-Q4 .....	23
Figure 5. Autonomy-Q5 .....	23
Figure 6. Comparative-Q1 .....	25
Figure 7. Comparative-Q2.....	25
Figure 8. Opinion-Q1 .....	26
Figure 9. Opinion-Q2.....	27
Figure 10. Opinion-Q3 .....	27
Figure 11. Opinion-Q4 .....	28
Figure 12. Opinion-Q5 .....	29
Figure 13. Acceptance-Q1 .....	30
Figure 14. Acceptance-Q2 .....	31
Figure 15. Acceptance-Q3 .....	31

## LIST OF TABLES

Table 1. The amount of Gender from the questionnaire .....	18
Table 2. The age distribution from the questionnaire .....	18
Table 3. The marital status from the questionnaire.....	19
Table 4. The Education from the questionnaire.....	19
Table 5. The income distribution from the questionnaire .....	20
Table 6. The experience from the questionnaire.....	20
Table 7. Oprobit Regression Analysis of Higher Education People will Plan their own Future in advance .....	33
Table 8. Oprobit Regression Analysis of Euthanasia is a Kind of Relief.....	34
Table 9. Oprobit Regression Analysis of People with lower Income will think that euthanasia is a burden-reducing behavior to family .....	34

# INTRODUCTION

## Background

Since the Cardiopulmonary Resuscitation (CPR)<sup>1</sup> has been invented, “Should doctor do CPR until the patient die?” become a big issue. People have the right to reject medical treatment or not? The right of death has been gradually emphasized by people. With the advances of medical health and medical technology, the average age of our country has been raised up. Taiwan become an aging society<sup>2</sup>. In 2018, the data from Ministry of Health and Welfare shows that there was 172,859 people died in this year, 48,784 out of 172,859 people were died with cancer<sup>3</sup>. It took up 28.2% of the total death, also it has been perennial the champion of death for 37 years. Furthermore, the death clock gets faster, from 10 minutes and 56 seconds, reduced 10 seconds. It means that every 10 minutes and 46 seconds a person died of cancer<sup>4</sup>. It just breaks the record. According to the data from Ministry of Health and Welfare, the top reasons that cause people died is cancer. The terminal-stage cancer patients are facing to the painful and their own death, and cannot unbearable anymore, can the patient have the right to decide his own way of death at this moment? When “quality of life” conflicts with “length of life”, how would you make the decision?

Do you have dignity<sup>5</sup>? Do you want to decide the end of your life? In this advanced society, can we have the right to decide our “death”? If yes, then how many

---

<sup>1</sup> National Academy for Educational Research, "Cardiopulmonary Resuscitation (Cpr)," <http://terms.naer.edu.tw/detail/1294722/>.

<sup>2</sup> Zheng Hong Da, "Taiwan Enters the "Aged Society" and Reaches the "Super-Aged Society" 8 Years Later," *Liberty Times Net* 2018.

<sup>3</sup> Statistics Department, "Statistics of Causes of Death in 107 Years," (Ministry of Health and Welfare, 2018).

<sup>4</sup> Chen Miao-Hua, "More Than 40,000 Died in a Year! Cancer Once Again Ranked First among the Top Ten Causes of Death," *World People News*, June 22 2019.

<sup>5</sup> Shan ; Zhuo-Ran Ru-Chao, Deng ; Wen-Chu, Cheng ; Ru-Yi, Li, "Euthanasia: The Right to Live or the Dignity of Death?," *Daily News*, January 28 2015.

people will choose to die in this short time? If no, then how many people will still live with painful? So, if you have the right to decide how you want to die, what ways would you choose? Also, would you want to leave this world with happiness or sadness? This seems like a complicated question, but the answer is very simple. Euthanasia or Physician-Assisted Suicide (PAS)<sup>6</sup> have been legalized in some countries and states. But how can we determine the standard in front of euthanasia? Are there any standards that could prevent abusing and misusing it? Moreover, is the standard clear enough to recognized by everyone? To legalize euthanasia will help them or hurt them? The main argument still focuses on where is the standard and where are the laws to protect the patients to prevent abusing by the doctor. The researcher is curious about how much people will be happy if they could decide their own life and also whether people could accept euthanasia to be legalized or not.

### **Motivation**

The researcher is wondering why we cannot have the right to decide how we want to die. One day the researcher saw a news, it said that a girl, seventeen years old, has been sexually abused at 11 and raped at 14-year-old. She had been very painful every day and every moment. She wanted to die because of her psychological pressure<sup>7</sup>. Also, there was a famous sport anchor, Frank Fu, went to Switzerland to ended up his life by assisted suicide. He was reluctant to leave his family at first, but he still finished the assisted suicide in the end<sup>8</sup>. So, the researcher starts to think why we cannot decide our own life? Why the final decision is at “the doctor” or “the government”? why? It’s not fair. It’s our life, not yours. If people have the right to

---

<sup>6</sup> CNN-Editorial-Research, "Physician-Assisted Suicide Fast Facts," *CNN*, June 11 2020.

<sup>7</sup> Miranda Aldersley, "Dutch Girl, 17, Who Was Sexually Abused at 11 and Raped as a 14-Year-Old Is Legally Allowed to Die after Contacting 'End-of-Life' Clinic Because She Felt Her Life Was Unbearable Due to Depression," *Daily Mail*, June 4 2019.

<sup>8</sup> Liu Zi-Wei, "The Last Message from Taiwan's Former Anchor Frank Fu before the "Euthanasia"," *BBC News*, June 6 2018.

decide their life, will they become happier?

### **Research Purpose**

Doing this research, people should think about the patient's feeling, most of them are suffering the painful that they couldn't suffered. At the end, they still cannot choose their own decision. In this research, it could be a reference for Taiwan. Let people know more about "Euthanasia<sup>9</sup>" or "Physician-Assisted Suicide<sup>10</sup>", also let people know who could do this treatment and where is the standard. In the recent society, how many people in Taiwan needed or wanted euthanasia? But they cannot execute it because it is not legal yet. During these days, are they still suffering those painful? Are they still live with the hope? Or they're just like a dead person, lying on the bed and waiting for dead? Everyone has the basic human right and we have to save the right by ourselves.

### **Research Questions**

What are the general opinions that would affect to Euthanasia?

### **Contribution**

The researcher thinks this study can make our society become better and better. Because this issue has been argued for a few years, it still cannot be legal in Taiwan. So, the researcher is wondering that after listening to this research, everyone will change the idea of this issue. Euthanasia is not a type to kill someone without reasons, it is a way to help someone to relief.

### **Limits and Delimits**

It's hard to get information from everyone, the researcher only can get some information through questionnaires or interviews, but not everyone can answer it. For

---

<sup>9</sup> Dr. Kalaivani Annadurai, "Euthanasia: Right to Die with Dignity," (2014).

<sup>10</sup> CNN-Editorial-Research, "Physician-Assisted Suicide Fast Facts." CNN, (2020).

delimit, the researcher would try to solve the problems between those interviewees, to find more knowledge from it. Also, the researcher will try to find out why people agree and why disagree to this issue. The reasons of these questions and what laws may obstruct or how would it affect to people.

# LITERATURE REVIEW

## History Background

Philosopher Helga Kuhse<sup>11</sup> said “Euthanasia' is a compound of two Greek words – eu and Thanatos meaning, literally, 'a good death'. Today, 'euthanasia' is generally understood to mean the bringing about of a good death – 'mercy killing,' where one person, A, ends the life of another person, B, for the sake of B.” This is how “euthanasia” comes. During 5th Century B.C.-1st Century B.C., in ancient Greece and Rome, before the coming of Christianity, attitudes toward infanticide, active euthanasia, and suicide had tended to be tolerant<sup>12</sup>. Many ancient Greeks and Romans had no clearly defined belief in the intrinsic value of an individual human life. Although the Hippocratic Oath<sup>13</sup> stopped doctors from giving drugs to people, many doctors still giving them a deadly drug to anybody, not even if asked for, few of the ancient Greek or Roman doctors followed the faithfully. At that time, people generally supported voluntary death rather than long-term pain, and doctors usually were requested to give poison to those patients by themselves.

In 12th Century to 15th Century, Christian views on Euthanasia reinforce the Hippocratic Oath. The rise of Christianity, the belief of God became stronger, it also strengthened the view of the Hippocratic Oath. Its result by the twelfth through fifteenth centuries, the result is that the medical opinion against euthanasia is almost unanimous<sup>14</sup>.

And it comes to 1870, Samuel Williams first proposed using anesthetics and

---

<sup>11</sup> Helga Kuhse, "Euthanasia Fact Sheet," <https://www.worldrtd.net/euthanasia-fact-sheet/>.

<sup>12</sup> Ian Dowbiggin, "A Merciful End: The Euthanasia Movement in Modern America," (2003).

<sup>13</sup> MD William C. Shiel Jr., FACP, FACR, "Medical Definition of Hippocratic Oath," <https://www.medicinenet.com/script/main/art.asp?articlekey=20909>.

<sup>14</sup> M.D. Michael Manning, *Euthanasia and Physician-Assisted Suicide: Killing or Caring?*, (United States of America: Paulist Press, 1998).

morphine to intentionally end a patient's life. To implement euthanasia, must through doctor's evaluated and assistant. When the patient suffers from an incurable disease, doctor could end the life of the patient by injecting lethal drugs or stopping ineffective treatment. In general, the purpose of euthanasia is to end up patient's painful.<sup>15</sup>

Currently, voluntary euthanasia or doctor-assisted is legally available in parts of Australia, Belgium, Canada, Colombia, Luxembourg, the Netherlands, Switzerland, and several US States.

### **The Definition of Euthanasia**

In Green-Pedersen's article discussing the issue of Euthanasia<sup>16</sup>. The author points out among different countries, the debates on euthanasia varied based on the political reasons. We can understand how fervent and sensitive for those who do not agree on the subject of euthanasia. Euthanasia is a sensitive issue and most people do not understand completely. Marcoux, Mishara and Durand in their research pointed out that people's incomplete understanding of euthanasia might lead to wrong interpretation of opinion polls<sup>17</sup>. Without introduction of definition of euthanasia, one could not conduct a significant research on the topic. We need to clearly define and categorize the idea of euthanasia in order to further our understanding of people's thought on it.

We could say that Euthanasia has been defined as the "the painless inducement of a quick death" or "the painless killing of a patient suffering from an incurable and

---

<sup>15</sup> Euthanasia and Physician-Assisted Suicide: Killing or Caring?, (United States of America: Paulist Press, 1998).

<sup>16</sup> Christoffer Green-Pedersen, "The Conflict of Conflicts in Comparative Perspective: Euthanasia as a Political Issue in Denmark, Belgium, and the Netherlands," (Apr., 2007).

<sup>17</sup> Brian L. Mishara and Claire Durand Isabelle Marcoux, "Confusion between Euthanasia and Other End-of-Life Decisions: Influences on Public Opinion Poll Results," *Canadian Public Health Association* (2007).

painful disease or in an irreversible coma”<sup>18</sup>. According to the definition, it refers to the lethal behavior of a doctor do or not to do to a terminal patient. There are many different evaluations in law and morality to this, “Who is the killer?”. Supporters believe that the purpose of euthanasia is for the best way to the patient, while opponents believe that euthanasia is to kill the patient. This is the reason why euthanasia has been controversial for a long time.

### **Classification of Euthanasia**

According to whether the patient’s willingness, Euthanasia could be classified into different types. The types of euthanasia could be divided into seven parts, included “Active Euthanasia”, “Passive Euthanasia”, “Voluntary Euthanasia”, “Non-voluntary Euthanasia”, “Involuntary Euthanasia”, “Indirect Euthanasia” and “Physician-assisted Suicide”.

- (1) Active Euthanasia: The active acceleration of a "good" death by use of drugs or lethal injections, whether by oneself or with the aid of a doctor.<sup>19</sup>
- (2) Passive Euthanasia: it occurs when the patient dies because the medical professionals either don't do something necessary to keep the patient alive, or when they stop doing something that is keeping the patient alive.<sup>20</sup>
- (3) Voluntary Euthanasia: the person who wants to die and says so.<sup>21</sup>
- (4) Non-voluntary Euthanasia: the person cannot make a decision or cannot make a meaningful choice between living and dying, such as child, very young baby or a Persistent Vegetative State (PVS).<sup>22</sup>

---

<sup>18</sup> Marvin Kohl, "The Morality of Killing : Sanctity of Life, Abortion, and Euthanasia," *New York: Humanities Press* (1974).

<sup>19</sup> MD William C. Shiel Jr., FACP, FACR, "Medical Definition of Active Euthanasia," <https://www.medicinenet.com/script/main/art.asp?articlekey=7422>.

<sup>20</sup> BBC, "Active and Passive Euthanasia," BBC, [http://www.bbc.co.uk/ethics/euthanasia/overview/activepassive\\_1.shtml](http://www.bbc.co.uk/ethics/euthanasia/overview/activepassive_1.shtml).

<sup>21</sup> "Forms of Euthanasia," BBC, <http://www.bbc.co.uk/ethics/euthanasia/overview/forms.shtml>.

<sup>22</sup> Ibid.

- (5) Involuntary Euthanasia: the person wants to live but is killed anyway. This is usually murder but not always.<sup>23</sup>
- (6) Indirect Euthanasia: this means providing treatment that has the side effect of speeding the patient's death.<sup>24</sup>
- (7) Physician-Assisted Suicide: this usually refers to cases where the person who is going to die needs help to kill themselves and asks for it. It may be something as simple as getting drugs for the person.<sup>25</sup>

### **Facts**

According to the data of the Ministry of Health and Welfare, it shows that there were 172,859 people died in 107. However, there were 48,784 people died of cancer<sup>26</sup>, it means that they had been fighting with the illness for a long time. Could you imagine how painful will it be? In recent society, some people always think that they know the painful which patients are suffering, but the truth is they won't know how painful those patients are. Those people always help patients decide their painful and also decide their life. Thus, is there any way that could decrease the painful that patients are enduring? Euthanasia or Physician-Assisted Suicide could be their choices to help them release from the painful. Take cancer as example, while the patients were under the treatments, it will bring a lot of problems to their family. First of all, their family have to endure the huge sorrow from it. They might cry every day or be upset for a short period of time. Second, they also might spend a lot of money for paying the medical expenses. It might be a pretty heavy pressure for a normal family. Next, the relationship between patient and family might be bad, because of the different opinions for the treatment decision. For instance, the patient wants to quit

---

<sup>23</sup> Ibid.

<sup>24</sup> Ibid.

<sup>25</sup> Ibid.

<sup>26</sup> Miao-Hua, "More Than 40,000 Died in a Year! Cancer Once Again Ranked First among the Top Ten Causes of Death."

the treatment due to it is too painful, but patient's family do not want to quit, they believe that it still has a chance to recover from the illness. Last, to decrease the painful that patients suffered. Although the medical technology improved quickly, but it still cannot control every illness. Some illness still has no answer to recover, during the road to death is pretty painful. Therefore, at the situation of the result is death, euthanasia will help the patient release from the painful.<sup>27</sup>

Ward and Tate mentioned that there are many doctors are facing the difficult decisions about euthanasia between patients and doctors. Some doctors will encounter the situation that patient wants doctor to hasten their death. It means that patients think that it's too painful to continue the treatment.<sup>28</sup> Due to this situation, euthanasia should be widely discussed in every country. Moreover, even though in a developed country or a developing country, the problem of insufficient medical resources is inevitable. Thus, government should distribute the medical resources effectively. For some patients, continue the treatment won't turn their illness better and better. Why not provide them a choice, which is euthanasia, to help them decrease the painful, also reduce the cost of the medical expense. But on the other side, it's possible that euthanasia might be abused. Such as doctor announces that the treatment is invalid, family members don't want to take the responsibility of the patients or enforce euthanasia without the patient's agreement. These situations not only take away the right of patient's life but also become a criminal. So before legalizing euthanasia, government should draw the clear line in it.

### **Legal Countries**

After that, Netherlands is the first country to legalize euthanasia in 2001 and took effect in 2002. And Belgium legalized it in the next year, 2002. Furthermore, in 1997,

---

<sup>27</sup> Chen Yu Hua, "Make a Reservation to My Good Farewell," *Business Today*, June 2 2016.

<sup>28</sup> B. J. Ward and P. A. Tate, "Attitudes among Nhs Doctors to Requests for Euthanasia," *BMJ: British Medical Journal* (1994).

Oregon is the first state in United State that allowed Physician-assisted suicide, but it need to be eligible, patients must be given six months or less to live, be at least 18 years old, and submit three separate doctor requests. Also, in 2009 the Supreme Court of South Korea recognized a “right to die with dignity” in its decision to approve a request by the family of a brain-dead woman that she be removed from life-support systems. In 2020, euthanasia is legal in the Netherlands, Belgium and Luxembourg, and is being debated in Spain and Portugal. Switzerland allows physician-assisted suicide in some cases, and Italy and France allow terminally ill patients to stop treatment in some cases. In Italy, the country’s top court ruled last year that assisted suicide should not be considered illegal in some circumstances.<sup>29</sup>

### **Current situation in Taiwan**

In Taiwan, has successively enacted two regulations on passive euthanasia, the “Hospice Palliative Care Act<sup>30</sup>” and the “Patient Right to Autonomy Act<sup>31</sup>”. Active Euthanasia and Physician-Assisted suicide are more controversial, and they are still not legal in Taiwan. Article 275 of the Criminal Law<sup>32</sup> clearly define processes suicide as a criminal act, and if you help others to commit suicide, you must be bear criminal responsibility. So, in Taiwan, there are still illegal to implement Euthanasia to Patients.

### **Argument/Debates**

With the advancement of modern medical technology, the average life of human has increased substantially. Also, with the advancement of life support equipment, it

---

<sup>29</sup> Elisabetta Povoledo, "Vatican Reiterates Its Opposition to Euthanasia and Assisted Suicide," *The New York Times*, Sep. 22 2020.

<sup>30</sup> Ministry of Health and Welfare, "Hospice Palliative Care Act," ed. MINISTRY OF JUSTICE THE WORKING GROUP OF THE R.O.C LAWS & REGULATIONS DATABASE (Laws & Regulations Database of The Republic of China: Ministry of Health and Welfare, 2013).

<sup>31</sup> "Patient Right to Autonomy Act," ed. Ministry of Justice The Working Group of the R.O.C Laws & Regulations Database (Laws & Regulations Database of The Republic of China: Ministry of Health and Welfare, 2019).

<sup>32</sup> Ministry of Justice, "Criminal Code of the Republic of China," ed. Ministry of Justice (Laws & Regulations Database of The Republic of China: Ministry of Justice).

extended the distance between human and death. However, many people who use this to continue their lives have already lost their quality of life. In addition, even if technology progress is fast, there are still many terminal illnesses in modern society that cannot be effectively cured at the present, and the symptoms can only be alleviated through a passive way to delay the arrival of the death. No matter it comes from physician pain or mental pressure, patients were suffering all the time. Under this painful situation, supporters think that euthanasia is a relief for these patients. However, oppositions think that euthanasia involves many levels, including laws, medicine, religion, etc. Oppositions think that Euthanasia is a murder; Supporters consider Euthanasia as a relief. That's why this topic has been controversial till now.

### **Supporters**

From the perspective of autonomy, supporters think that everyone has the basic human right, patients can decide their own death. From patient's point of view, they have been suffering great pain for a long time. Thus, some of the patients tried to give up, they try to end of their life by suicide. One scholar had proposed that after legalized Euthanasia, the patient will no longer be afraid of suffering unbearable pain, and there will be another way to decide their own life<sup>33</sup>. But in the reality, we cannot foresee what will happen the next, so how many people can really decide their own death by themselves?

From perspective of medical resources, nowadays, our technology improves very fast, the ability of sustain life has increased significantly, but the resources are still limited<sup>34</sup>. Take Persistent Vegetative State (PVS) as an example, patients usually have brain damage for months or years, it is hard to wake up miraculously. Moreover,

---

<sup>33</sup> Ezekiel J. Emanuel, "What Is the Great Benefit of Legalizing Euthanasia or Physician-Assisted Suicide?," *The University of Chicago Press* (1999).

<sup>34</sup> Ibid.

during these months and years, patient's family have to pay lots of money on long-term care. For a rich family, it will be fine for them. But if they come from a well-off family, it could be slightly difficult. Then how about the poor family, that would be a huge pressure to them, even can't afford anything but only paying the care costs. Generally speaking, family members of PVS should not want to give up salvage opportunities, so do the researcher, but sometimes people are tired of the financial and physical problems, family members are forced to choose Euthanasia to end the pain of both sides. A simple blinking, moving fingers and other small movements of a PVS will be interpreted as meaningless reflex movements in medically, but for the family, it will be regarded as a kind of silent communication and tacit understanding or hope. Indeed, there are a small number of the patients who have woke up under the calling from family. But the cruel thing is that most patients can only lie in hospital beds day after day, leaving their families facing an unknown future, repeated care works, and heavy financial pressure. Therefore, some people will ask to let patient go home or die naturally. This kind of decision is painful and helpless, but from another perspective, it is also a compelling choice. When a person is sick and there is no hope of treatment, Euthanasia could be a way of death in order to avoid physical and mental pain.

From the perspective of relief, Euthanasia can help patients get rid of their pain. In fact, first aid is not necessarily helpful to everyone, this action is more like achieving its symbolic meanings. For instance, doctor has indeed treated the patient but still failed, in order to satisfy the emotional needs of relatives, it caused a great torture to the patient. So, instead of let patients keep suffering the pain day after day, why can't Euthanasia become another method to let them choose?

### **Opponents**

First of all, Euthanasia might cause psychological anxiety in patients<sup>35</sup>. Also,

---

<sup>35</sup> Ibid.

patients may make a hasty decision due to other pressures. Opponents mentioned that people cannot do decisions by ourself, people will be influenced by other people, so their thoughts might be changed because of others thoughts, and even more likely to be asked to commit suicide because of them. This statement seems reasonable, but many people's decisions may be manipulated, not only euthanasia may be controlled. The government's responsibility should be to formulate high-density regulations and implement them, rather than depriving patient's autonomy.

Second of all, society will increasingly despise the value of life<sup>36</sup>. As if Euthanasia has been legalized for a while, people might start to think that the end of life is just a normal thing, people will not take it seriously anymore. And also, many religious believe in life is precious, we should take our life seriously.

Next, from the perspective of doctors, doctors may abuse their rights and suggest patients to implement Euthanasia easily<sup>37</sup>. Many people worry that if euthanasia is legal, it will prompt physicians to not actively the treatments, or even abuse their rights due to interest considerations, or easily allow patients to actively euthanize. Thus, it is required that the government needs to specify and strictly review the procedures, so as to ensure that every patient who want to implement euthanasia has gone through legal and proper process. Moreover, as if doctors make a wrong diagnosis, it would cause an irretrievable result<sup>38</sup>. Many people suspect that if the doctor make a wrong diagnosis, the patient will be euthanized and the tragedy will be irreparable. For this statement, supporters admit that misdiagnosis is indeed difficult

---

<sup>36</sup> Wang Jun-Yang, "The Choice at the End of Life-on the Current Situation and Prospects of Euthanasia in Taiwan," National Taiwan University Law Academics, <https://medium.com/ntulawazaleafestival/%E7%94%9F%E5%91%BD%E7%9B%A1%E9%A0%AD%E7%9A%84%E6%8A%89%E6%93%87-%E8%AB%87%E5%8F%B0%E7%81%A3%E5%AE%89%E6%A8%82%E6%AD%BB%E4%B9%8B%E7%8F%BE%E6%B3%81%E8%88%87%E5%B1%95%E6%9C%9B-6fb8b18813>.

<sup>37</sup> Ibid.

<sup>38</sup> Ibid.

to avoid completely, but they believe that if the possible risks are clearly explained to the patients and the patients are willing to bear, they should not be deprived of the right to choose euthanasia. In addition, if this logic is implemented, negative euthanasia should not be allowed because it may also cause misdiagnosis.

Last but not the least, Euthanasia may cause “Slippery Slope Effect”<sup>39</sup>.

Opponents argue that if physicians-assisted suicide or voluntary active euthanasia was legalized, according to logical deduction, involuntary patients may eventually be killed. For example, if we throw a bag of garbage in the corner of the road, few minutes later, there might be another bag of garbage will be there; few hours later, that corner might become a mountain of garbage. However, it means that if euthanasia has implemented on the first patient easily, few years later, the situation might be worse, even the involuntary patients may be killed easily. Thus, the value of human would be seemed as priceless.

---

<sup>39</sup> Michael Manning, *Euthanasia and Physician-Assisted Suicide: Killing or Caring?* United States of America: Paulist Press, 1998.

## **METHODOLOGY**

In this research, the researcher wants to find out the reasons that influenced the idea of euthanasia. In this research, the researcher collected 291 questionnaires. In order to know what are the general opinions from the society. This chapter contains research design and data collection.

### **Research design**

In order to complete this research, firstly the researcher search the information through literature review, and secondly, the researcher create a questionnaire that connect to what the researcher find in literature review. After that, the researcher send the questionnaires to people by posting the link on Facebook and Instagram account. Finally, the researcher will analyze the data of the questionnaires.

In literature review, the researcher found out that not only Taiwan are arguing this issue, it's almost the whole world are arguing that should Euthanasia be legalized or not. There are also some countries already legalized and some are only can accept Physician-Assisted Suicide. And also, what are the reasons that would affect people change their idea to Euthanasia. Think about it, to prolong patient's life is better? Here's some reasons that would affect people's opinions, finance problems, relief to patients, relatives, religious, abuse issue, human right and so on. No matter people will support or not, these are the variables that would influence people. Thus, after that, the researcher wants to do a survey that could know what's the general opinion of Euthanasia, and also would those variables really influence to people's opinions? So, according to the information what researcher found, the researcher is going to do survey to collect the data. The researcher choose questionnaire survey is because the researcher wants to investigate public opinions from different age. However, through this questionnaire, the researcher could get more opinions from it. Google Form will

be the instrument to make questionnaire. And the researcher would design the questions and create it by using Likert Scale. After finishing the questionnaire, the researcher could send the link to Line, Facebook and Instagram account. Using these social media, the researcher could collect different generation people, from teenagers to elders. And also, the researcher could ask friends and families to share it to others as well. This questionnaire will be posting every day; thus, it can increase more clicking rate. From August 14th to 21st, the researcher spent a week to send questionnaires to his friends and families, also send it to passerby and collect the data randomly. Finally, the researcher received 291 respondents in total. After collecting the data, the researcher would use the STATA which is the instrument to analyze the data. By using descriptive statistics and regression, the researcher would try to find out the relationship between the variables and the research question.

### **Data Collection**

The research population is Taiwanese. Because the research question was related to the general opinion in Taiwan, so the research population must be Taiwanese. And in the data collection, the research needs both young generations and elders, because different age might encounter different things, then people might will have different opinions. Basically, the researcher shared the link of the google form to Instagram account and also share it on Facebook. The researcher could collect younger generation from Instagram. Nowadays, younger generation spend lots of time on social media, that's why the researcher choose to use Instagram to explore the data from it. For the elders, actually the researcher uses two ways to collect. First, share it to Facebook because old people us it more and the interface is more suitable for them. Second, send the questionnaire to his family directly, and also sent it to family's friends directly. Because most of them were age between fifty to sixty-five, some are

older. The researcher needs both younger generation and elders is because that the researcher think “age” might affect people’s attitude to Euthanasia. For elders, because they have more life experiences and also might encounter many deaths from others. Thus, they might have different sight to look at Euthanasia. Nowadays, younger generation become more open minded, no matter on what kind of issue, and also youngers will stand out fight for their rights. So, in the end of the collection, the researcher collected 133 pieces of data which were over fifty-one years old; and 171 pieces of data which were under fifty years old.

### **Measurement**

In this research, the author use Likert scale to measure the variables, including the autonomy, the relief and the acceptance. From the questionnaire, Q7-Q12 is related to autonomy; from Q15-17 is related to relief and from Q21-23 is related to acceptance.

## DATA ANALYSIS

### Descriptive Statistics

In this research, there are 127 males and 164 females respond to the questionnaire.

Gender	Amount
Male	127 (43.6%)
Female	164 (56.4%)

**Table 1. The amount of Gender from the questionnaire**

Sources: Edited by the researcher

About the age, the researcher divided into five parts. Among the result, most of the people are from the age of 51-65 years old. There are 30 people (10.3%) who are under 20, 77 people (26.5%) between 21-35 years old, 51 people (17.5%) between 36-50 years old, 120 people (41.2%) between 51-65 years old and 13 people (4.5%) are over 66 years old. In this research, the researcher tried to find the balance between youngers and elders, tried to collect different opinions from different generation.

Age	Amount
Under 20 years old	30 (10.3%)
21-35 years old	77 (26.5%)
36-50 years old	51 (17.5%)
51-65 years old	120 (41.2%)
Over 66 years old	13 (4.5%)

**Table 2. The age distribution from the questionnaire**

Sources: Edited by the researcher

About the marital status, 165 people (56.7%) are married and 126 people (43.3%) are unmarried.

Marital Status	Amount
Married	165 (56.7%)
Unmarried	126 (43.3%)

**Table 3. The marital status from the questionnaire**

Sources: Edited by the researcher

About the Education background, over fifty percent people were graduated from college. There is only one person (0.3%) that is graduate from primary school. There are 11 people (3.8%) from junior high school, 99 people (34%) from senior high school, 159 people (54.6%) from college and 21 people (7.2%) from bachelor degree or up.

Education	Amount
Primary school	1 (0.3%)
Junior High school	11 (3.8%)
Senior High school	99 (34%)
College	159 (54.6%)
Bachelor degree	21 (7.2%)

**Table 4. The Education from the questionnaire**

Sources: Edited by the researcher

About the income, from table 5 we could see that most people only earn under 40,000 NT dollars per month. There are 62 people (21.3%) earn under 20,000 NT dollars per month, 65 people (22.3%) earn between 20,001 to 30,000 NT dollars per month, 55 people (18.9%) earn between 30,00 to 40,000 NT dollars per month, 41 people (14.1%) earn between 40,001 to 50,000 NT dollars per month, 18 people (6.2%) earn 50,001 to 60,000 NT dollars per month, 15 people (5.2%) earn 60,001 to 70,000 NT dollars per month, 8 people (2.7%) earn 70,001 to 80,000 NT dollars per month and 27 people (9.3%) earn more than 80,001 NT dollars. In table 5 we could see that over 50% of people's income were about 20,000 to 40,000 NT dollars, it shows that most people were just a well-off family.

Income	Amount
Under 20,000 NT dollars	62 (21.3%)
20,001-30,000 NT dollars	65 (22.3%)
30,001-40,000 NT dollars	55 (18.9%)
40,001-50,000 NT dollars	41 (14.1%)
50,001-60,000 NT dollars	18 (6.2%)
60,001-70,000 NT dollars	15 (5.2%)
70,001-80,000 NT dollars	8 (2.7%)
Over 80,001 NT dollars	27 (9.3%)

**Table 5. The income distribution from the questionnaire**

Sources: Edited by the researcher

About the experience of taking care of elders, there are 197 (67.7%) people have the experience of taking care of elders, and 94 (32.3%) people never have.

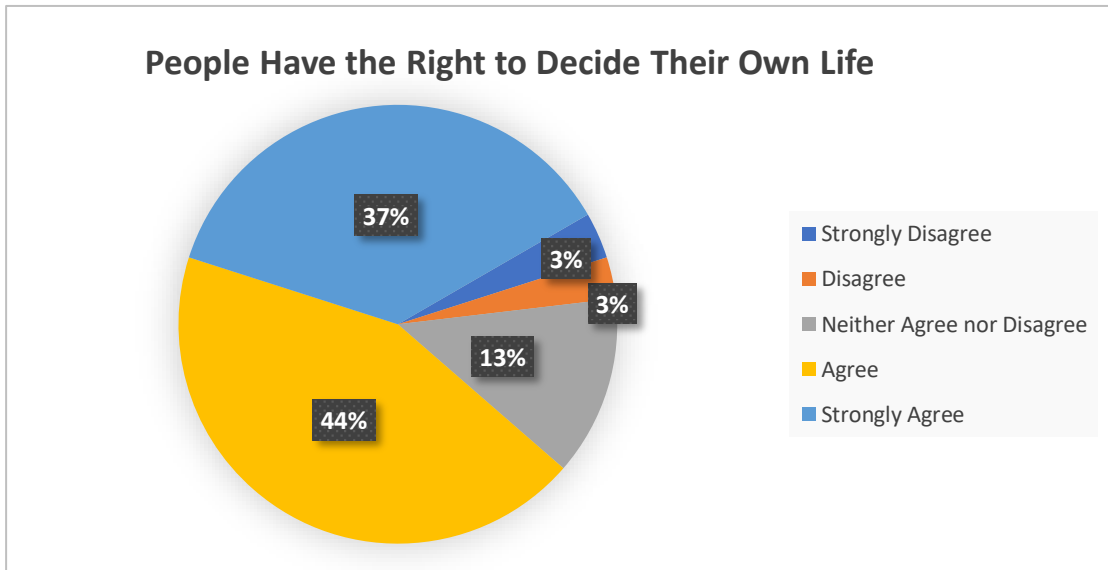
Experience	Amount
YES	197 (67.7%)
NO	94 (32.3%)

**Table 6. The experience from the questionnaire**

Sources: Edited by the researcher

### **The General Public Opinion of Patient Autonomy**

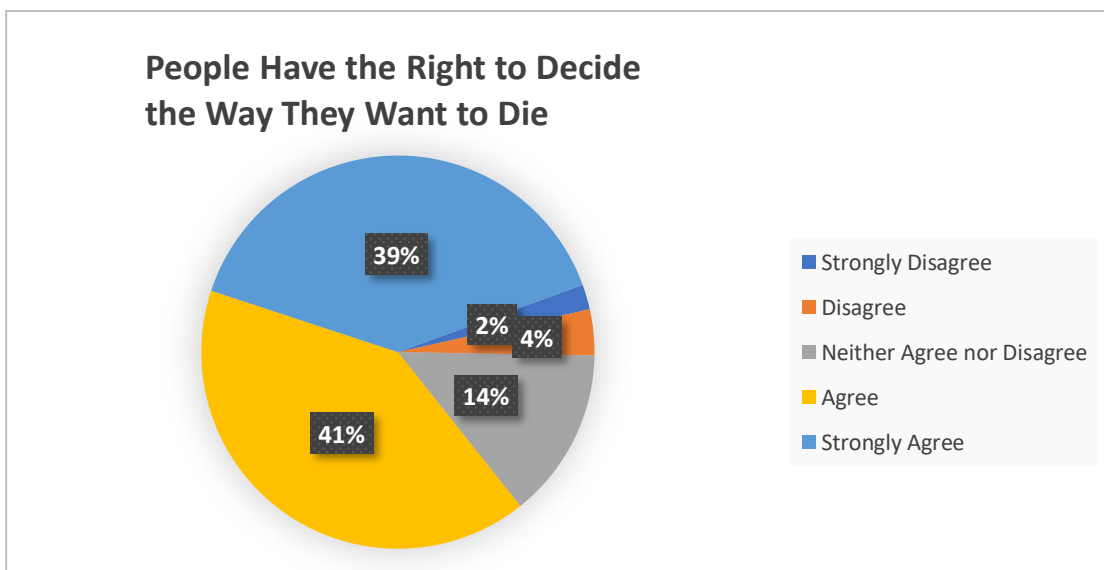
In this part of questionnaire, there are five questions that related to patient autonomy, asking the general opinion of their own right to their life when we are close to death, also do they have any plan about their future? First of all, the researcher found out that 236 people (80.2%) do agree with that people have the right to decide their own life and death, 39 people (13.3%) do not have any idea for it and 19 (6.5%) people disagree with it. From the result (Figure 1), we could see that over 80% of general opinions think people have the right to decide their own life.



**Figure 1. Autonomy-Q1**

Sources: Edited by the researcher

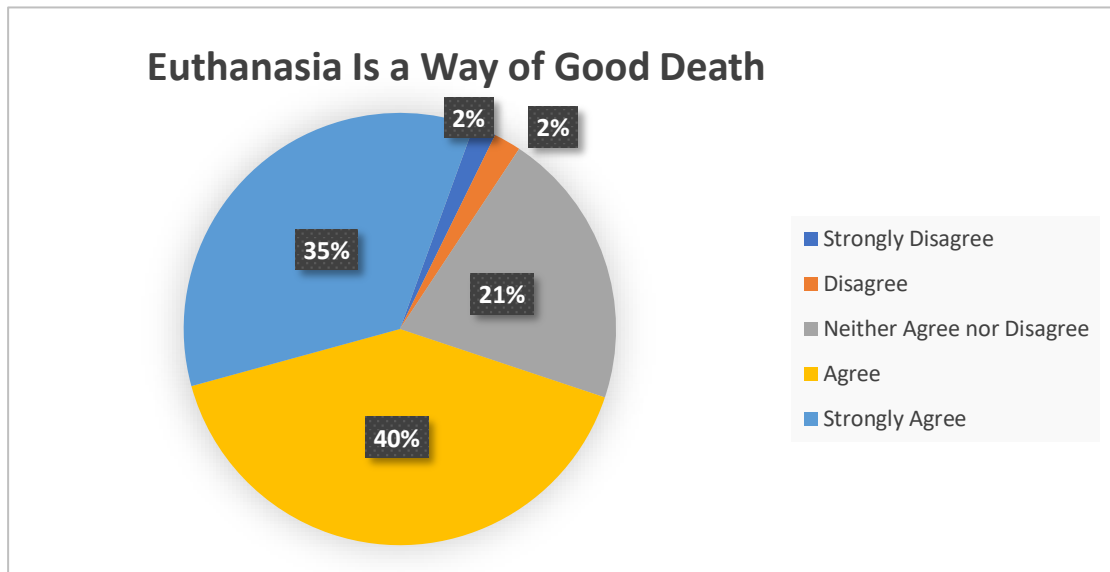
Secondly, can people have the right to decide the way that they want to die? Which means that if we were sick or whatever happened, do we have the right to decide the way we want to die? From the result (Figure 2), there are still 17 people (5.9%) disagree with this question, 41 people (14%) do not have any opinion and 234 people (80.2%) do agree with it.



**Figure 2. Autonomy-Q2**

Sources: Edited by the researcher

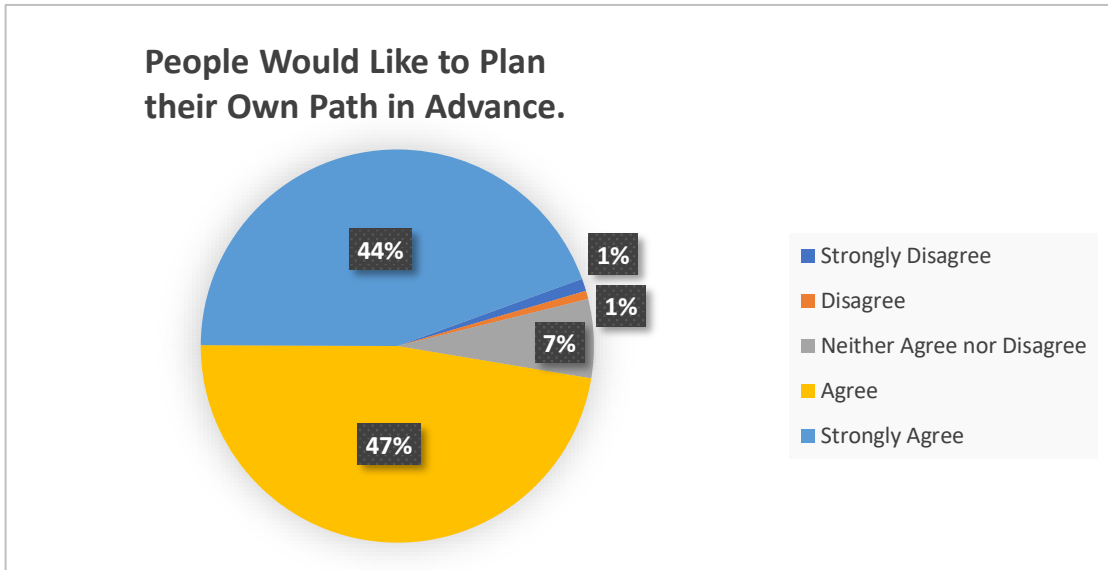
Thirdly, Euthanasia is a way that means good death to people. In this result (Figure 3), 221 people (75.4%) agree with this is a way that means good death to people, but there are still 11 people (3.7%) do not agree with it and also 61 people (20.8%) have no opinion here.



**Figure 3. Autonomy-Q3**

Sources: Edited by the researcher

Fourth, assuming there is something unexpected in the future, people would like to plan their own path in advance. In this result (Figure 4), we got 269 people (91.8%) agree with it, 19 people (6.5%) no opinion and 5 people (1.7%) disagree.

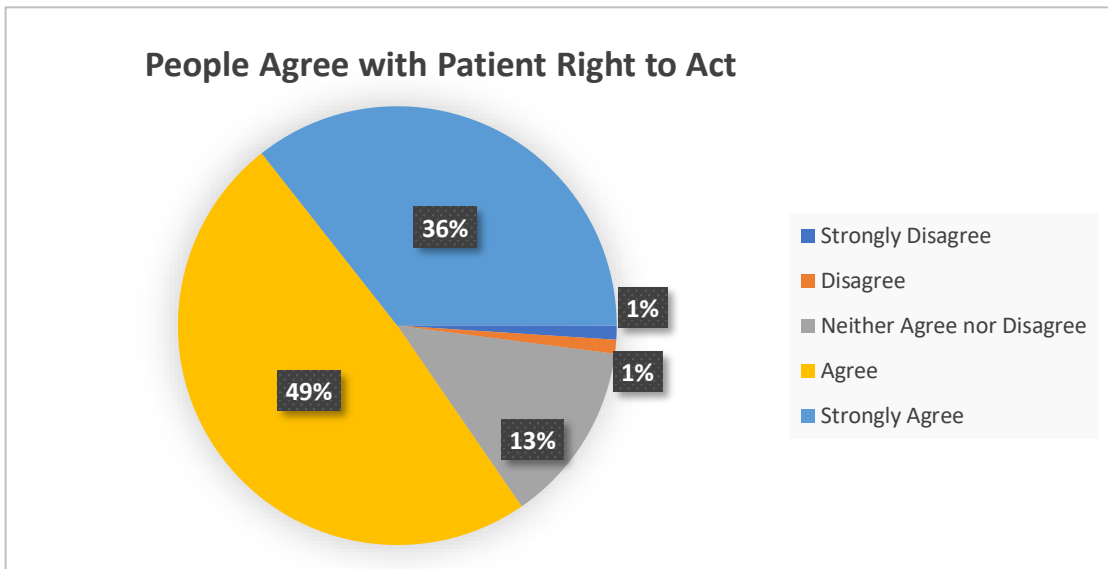


**Figure 4. Autonomy-Q4**

Sources: Edited by the researcher

Last but not the least, do people agree with Patient Right to Autonomy Act?

There are 247 (84.6%) people agree with it, 39 people (13.4%) no idea and 6 people (2%) disagree.



**Figure 5. Autonomy-Q5**

Sources: Edited by the researcher

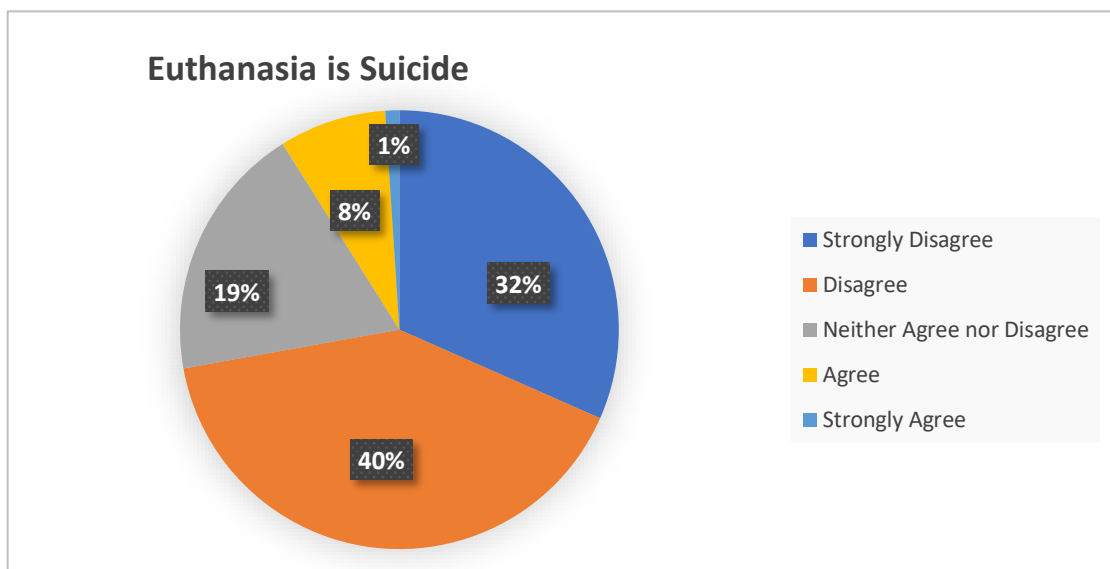
In this part of questionnaire, the researcher found out that the vast majority of people believe that people have the right to decide their own way of life and death; a

small number of people neither agree nor disagree; and those who disagree only account for less than 6% proportion. In addition, in modern society, people start to have the concept of "to decease is human", everyone will die in someday. The value of life lies not only in its length, but also in the meaning of life. Since human will all die, then people will want to plan their own future in advance. If they can choose euthanasia when they are both physically and mentally ready, it is also a "good death" method that many people think.

With the continuous evolution of the generations, people nowadays have a very high awareness of their own right to their life and death, and they think that life should be in their own hands. But according to the result, we could see that many people wants to plan their own future in advance, however, not all of them think they have the right to decide their own death even if they want to plan their own future.

### The Comparative Between Euthanasia and Suicide

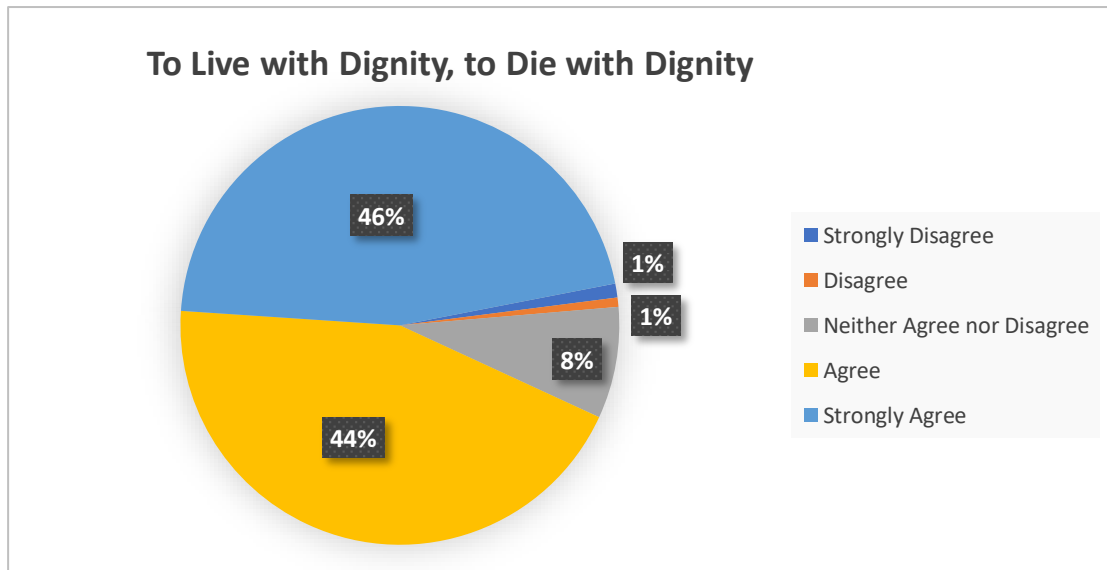
Is euthanasia equivalent to suicide? From the result (Figure 6), it shows that 72.1% (210 people) of general opinion think euthanasia isn't suicide, only 9% (26 people) of people consider euthanasia as suicide and 55 people (18.9%) have no opinion.



**Figure 6. Comparative-Q1**

Sources: Edited by the researcher

“To live with dignity, to die with dignity.” There are 263 people (90.1%) agree with this sentence and only five people disagree with it. We could say that general opinion stand with people are willing to have a good death if it is possible.



**Figure 7. Comparative-Q2**

Sources: Edited by the researcher

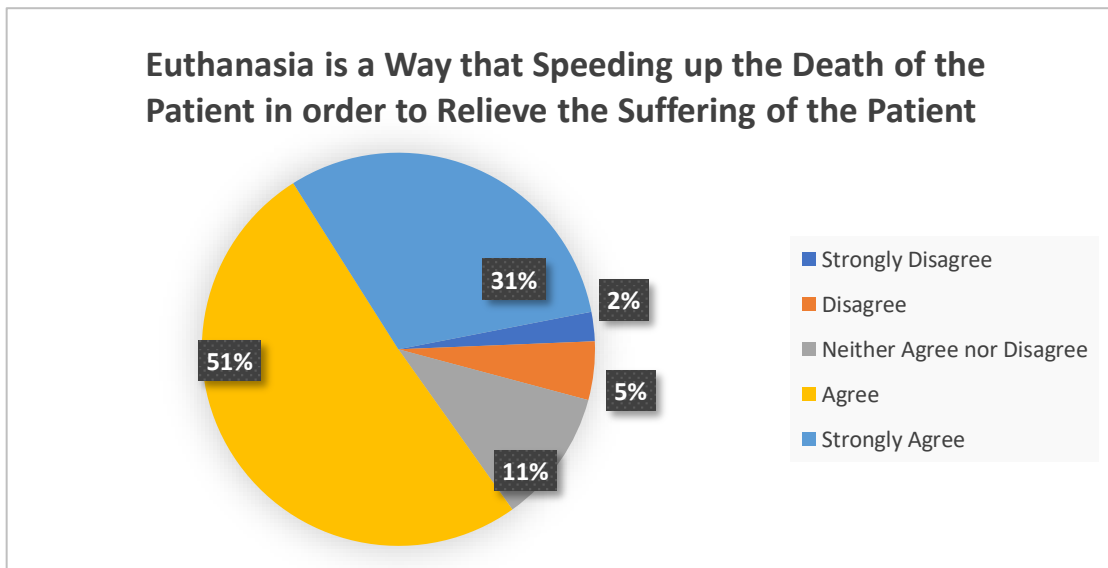
Is euthanasia equivalent to suicide? The replies from the form showed that disagree and strongly disagree accounted for 70% of the question that euthanasia is equivalent to suicide, nearly 20% said they neither agree nor disagree, while less than 10% agree with euthanasia is equivalent to suicide. Looking at this part, it is worth to discuss that what kind of thinking does people who disagree it have.

My personal interpretation is that the general public has a negative impression of the term "suicide". Jumping from a building, jumping from a track, cutting the wrist, etc. are several common news media reports of suicide. The process is shocking and subsequent, it also makes the impact on others and often gives society a very poor impression. On the contrary, euthanasia will not have a shocking picture, and usually

the greatest impact is only on yourself and the family around you. Perhaps this is why people think that "euthanasia" and "suicide" are not the same. As far as the researcher concerned, the researcher would say that euthanasia is one of the methods of suicide, one of which is systematic, more dignified, and more acceptable to the public, a way of suicide.

### The Public Opinion of Euthanasia

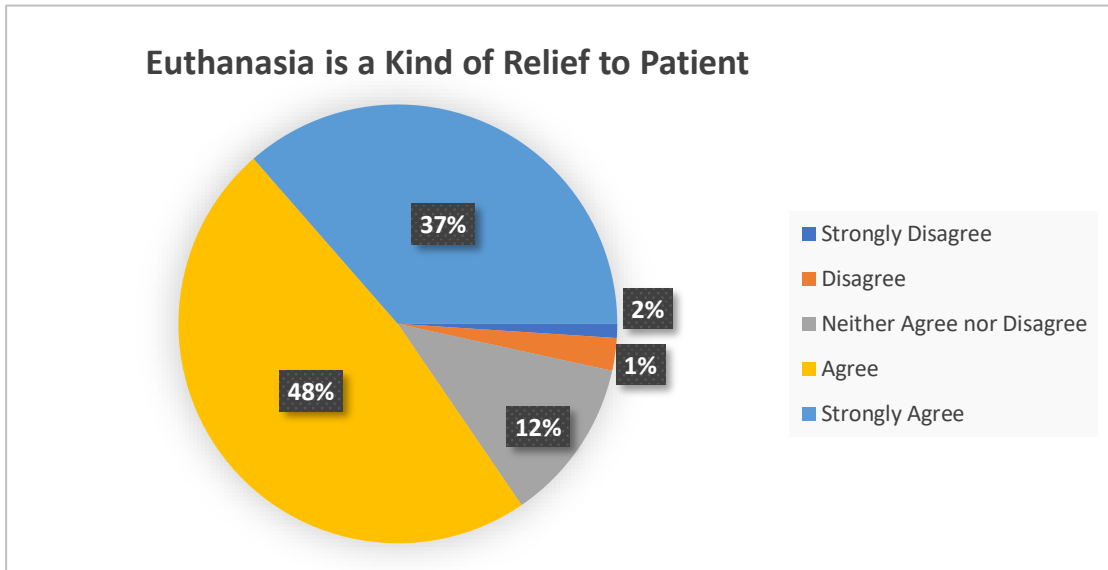
Euthanasia is a way that speeding up the death of the patient in order to relieve the suffering of the patient. According to the result, general opinion believe that euthanasia could help patients get rid of their pain in this way. 238 people (81.8%) agree with it, 21 people (7.2%) disagree and 32 people (11%) no opinion.



**Figure 8. Opinion-Q1**

Sources: Edited by the researcher

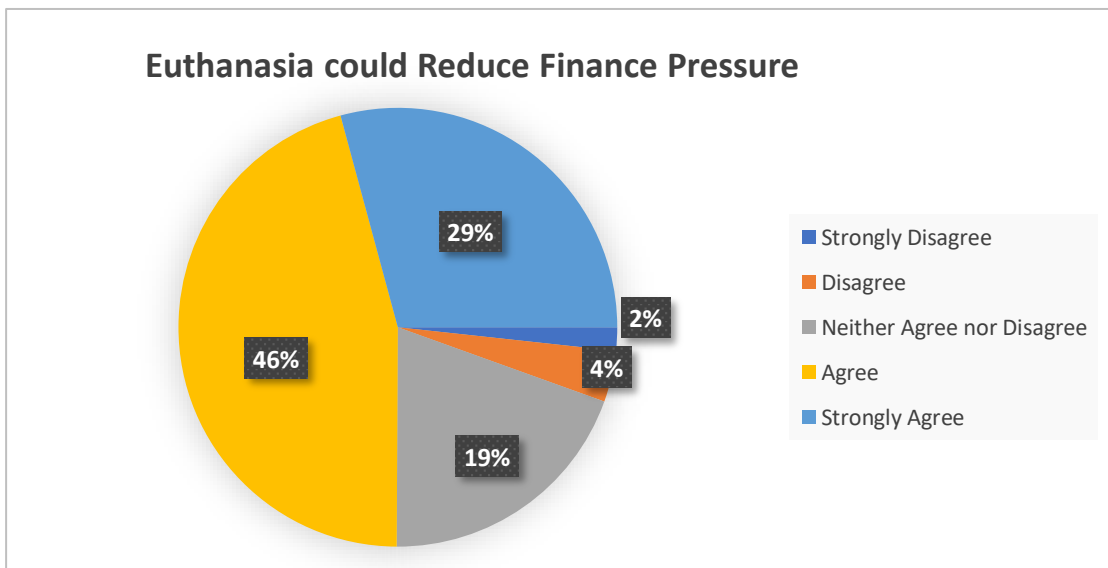
Secondly, euthanasia is a kind of relief to patient, there are 246 people (84.5%) think it is true, it can help the patient to relief from the pain, but 10 people (3.4%) don't think so.



**Figure 9. Opinion-Q2**

Sources: Edited by the researcher

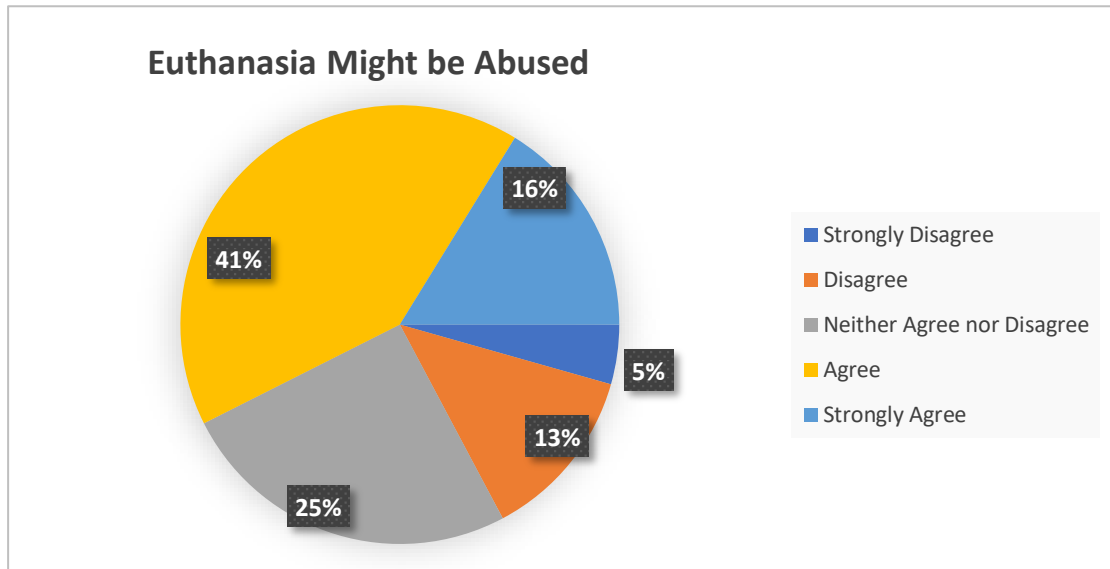
Third, from the perspective of finance problem, euthanasia could help family members to reduce the burden on. 218 people (74.9%) agree that it could help patient's family reduce the finance pressure, but 16 people (16%) disagree with it and 57 people (19.6%) no idea.



**Figure 10. Opinion-Q3**

Sources: Edited by the researcher

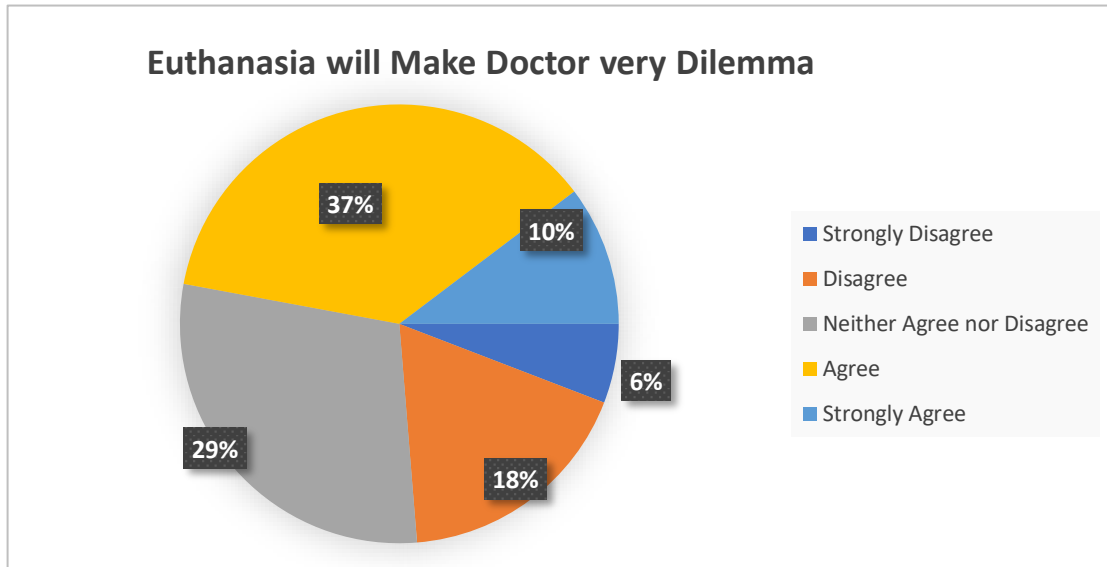
Fourth, euthanasia might be abused. According to the result, the researcher think that responders were confused about this issue, they might not be confirmed about their own answer. However, 170 people (58%) think that euthanasia might be abused, 72 people (24.6%) don't have any idea on it and 51 people (17.4%) disagree it.



**Figure 11. Opinion-Q4**

Sources: Edited by the researcher

Finally, only 137 people (47.1%) agree with euthanasia will make the doctor very dilemma, 85 people (29.2%) do not have any opinion and 69 people (23.7%) do not agree with it. This is the first question that the people who agreed are less than 50% in total. In fact, this is the issue of is the doctor a murderer? Or should doctor help patients or not? In the literature review, the researcher mentioned that if the doctor makes a wrong diagnosis, will him become a murderer? Or even the doctor abuses his rights due to interest considerations, or easily allow patients to actively euthanize. Thus, these situations will make difficulties for the doctor to make decisions.



**Figure 12. Opinion-Q5**

Sources: Edited by the researcher

Euthanasia will be proposed is because critically ill patients do not want to continue to live without seeing the possibility of recovery, and can only rely on life-support systems to barely sustain their lives and spend a lot of money on it. However, it gradually be noticed by the world and there are institutional and standardized medical death methods.

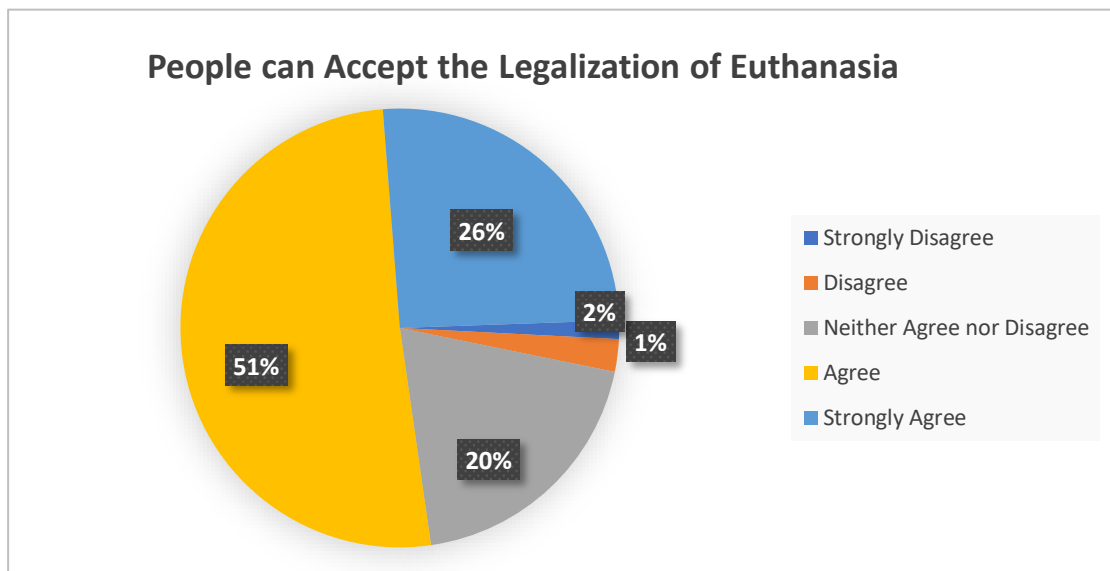
The above questions are related to patients and medical care. We can see the response results of the form. Most people think that the answers are in agreement. Therefore, we can reasonably speculate that perhaps euthanasia is a kind of relief for those patients and their families with major diseases, and it is also a kind of completely different possibility and choice to doctor who has done everything that they can do but still cannot change the status quo.

What's more, once euthanasia is passed, is there any possibility of abuse? For the answer to this question, agree and strongly agree accounted for more than 50%, while disagree and strongly disagree accounted for more than 30%. the researcher think that

the issue of euthanasia itself is life and death. In fact, no matter how we do it, we will never be able to eliminate the doubts about the possibility of "abuse". Perhaps what can be done is to try to formulate relevant laws and regulations to make it close to perfect, and also try to minimizing the possibility of abuse is the first priority.

### Acceptance of Euthanasia

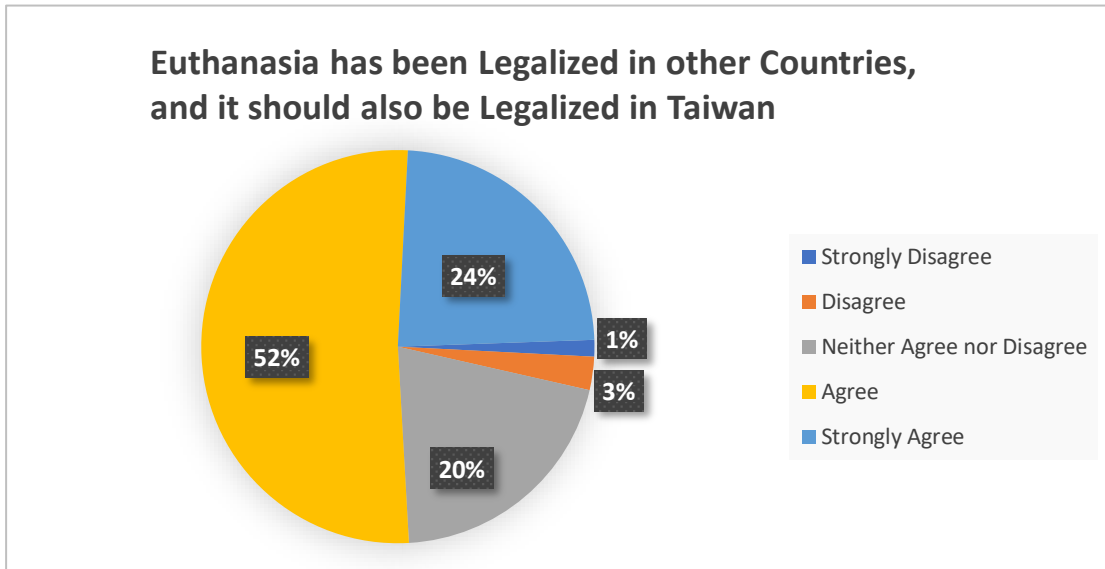
First of all, can people accept the legalization of euthanasia? 224 people (76.7%) said they agree with the legalization of euthanasia, 57 people (19.5%) have no idea with it, and 11 people (3.8%) disagree with it. From this result, it shows that about 77% of the general opinions think that they can accept the legalization of euthanasia.



**Figure 13. Acceptance-Q1**

Sources: Edited by the researcher

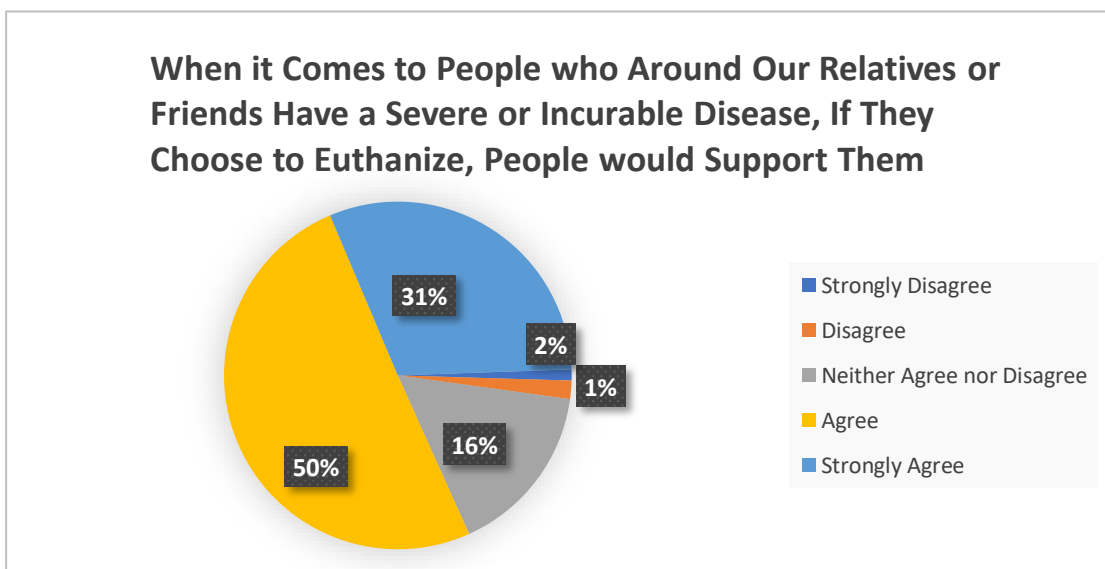
Secondly, Euthanasia has been legalized in other countries, and it should also be legalized in Taiwan. There are 220 people (75.3%) think that euthanasia should be legalized in Taiwan, 60 people (20.5%) have no idea and only 12 people (4.1%) disagree with it.



**Figure 14. Acceptance-Q2**

Sources: Edited by the researcher

Last, when it comes to people who around our relatives or friends have a severe or incurable disease, if they choose to euthanize, would people support them? According to the result, only 8 people (2.7%) disagree it and 47 people (16.1%) do not have opinion, the rest of the people (237 people, 81.1%) all think that they would support their decisions.



**Figure 15. Acceptance-Q3**

Sources: Edited by the researcher

In this part, from Q1 (Figure 13) and Q2 (Figure 14) we could see that over 75% of people who think that they can accept the legalization of euthanasia and also think that euthanasia should be legalized in Taiwan. As the author mentioned before, people nowadays have a very high awareness of their own right to their life and death, the issue of euthanasia will not stop discussing unless it was solved. What's more, from Q3 result (Figure 15), it shows that 80% of people agree that if their relatives or friends have a severe or incurable disease, people will support them if they choose to euthanize. That means most people do not want their friends or relatives be tortured by the illness. Also, the one who agree with Q3 is more than Q1 and Q2, it means that someone who has no idea with Q1 and Q2, they will change their mind because of the object is their relatives or friends.

### **Research Hypotheses**

Hypothesis 1: Higher education people will plan their own future in advance.

Hypothesis 2: Elders will think that euthanasia is a kind of relief to patients.

Hypothesis 3: People with lower incomes think that euthanasia is a burden-reducing behavior to family.

### **Regression**

In the questionnaire, the researcher asks "Assuming there is something unexpected in the future, I would like to plan my own path in advance." (Q10) and "I think euthanasia is a kind of good death." (Q11) After running the regression, the researcher put the independent variable "education" in the test, and the researcher found out that people who have the higher education are strongly agree with they would like to plan their own path in advance; in contrast, lower education people are strongly disagree with it. From the result, we could see that higher education people

would like to plan their own future, the reason might be because of higher education people learn more knowledge and see more, so they will like to make a plan for their future. On the other hand, the lower education people might have the traditional thought, such as honest people, they like to live their life step by step. Also, we could see that higher education people strongly agree that euthanasia is a kind of good death to them, but lower education do not agree with it. So, we could say that higher education people will like to plan their future and have a good death.

**Table 7. Oprobit Regression Analysis of Higher Education People will Plan their own Future in advance**

Hypothesis	Variables	Coefficient	P-Value	Significance
H1	Q10	0.253236	0.015	*
H1	Q11	0.1919833	0.050	*

Dependent variable: People will plan their own future in advance

Details of the empirical tests are in Appendix 2: Statistics Sheet

\*p<0.05, \*\*p<0.01, \*\*\*p<0.001

Secondly, in the questionnaire, the researcher asks “Euthanasia is a kind of relief to patients.” (Q16) After running the regression, the researcher use “Age” as the independent variable, try to find out that will the “Age” make people change their mind. From the result we could see that elders are strongly agree with it, it might be because of elders got more life experience and they also have encountered more situations, such as birth, illness, death, etc. they know a lot of things that teenagers did not know. As we know, not every elder have a healthy body, some are lying on the bed but some are still dancing in the park. So, some elders must know the pain of the illness or something, they know that some major diseases is very painful. Patient is tortured by illness and relatives are tortured by patient. In sum, euthanasia really is a kind of relief to those patients who need.

**Table 8. Oprobit Regression Analysis of Euthanasia is a Kind of Relief**

Hypothesis	Variables	Coefficient	P-Value	Significance
H2	Q16	-0.1190674	0.043	*

Dependent variable: Euthanasia is a kind of relief

Details of the empirical tests are in Appendix 2: Statistics Sheet

\*p<0.05, \*\*p<0.01, \*\*\*p<0.001

Thirdly, “Euthanasia is a burden-reducing behavior to family.” (Q17) asked by the researcher. “Income” is the independent variable in this test, the researcher tried to find out that will “income” force patient’s family to choose euthanasia? Through the regression test, independent variable “income” has significant in this test. From the result, lower income people agree with euthanasia is a burden-reducing behavior to family. On the other hand, people who has higher income do not think it is. Indeed, to let patient keep using life-support systems need lot of money, a lower income family might will have difficulties in it. Day after day, patient’s family work for those medical fees and they also suffer the pain from their emotions at the same time. In contrast, a rich family doesn’t care about that little money, what they want is to save the patient. Different world, different sights. Thus, euthanasia can’t help all people but it can help some people who really need.

**Table 9. Oprobit Regression Analysis of People with lower Income will think that euthanasia is a burden-reducing behavior to family**

Hypothesis	Variables	Coefficient	P-Value	Significance
H3	Q17	-0.076816	0.015	*

Dependent variable: people think that euthanasia is a burden-reducing to family

Details of the empirical tests are in Appendix 2: Statistics Sheet

\*p<0.05, \*\*p<0.01, \*\*\*p<0.001

## CONCLUSION AND SUGGESTION

The issue of euthanasia never stops discussing in the whole world. Also, there is no a correct answer said that euthanasia should be legalized or not. Moreover, the researcher finds out that euthanasia is hard to have a regulation, unless government set up a clearly standard and requirements. For instance, the researcher thinks that the requirements should focus on age, conscious, judgement, the unbearable pain or be diagnosed with an incurable disease by the physicians and so on. However, some people agree with euthanasia, but some people disagree.

However, from this research, we could know that people who agree with euthanasia stand for basic human rights and also patient autonomy. People can decide their own life and the way they want to die. Some people also think that euthanasia is a kind of relief to the patient who is suffering unbearable pain, they live like the hell, from morning to the night. They believe that euthanasia could let them die with dignity and happiness, like the meaning of euthanasia, a good death in ancient Greek.

In contrast, people who disagree stand for the issue of murder, the value of human life, duties of doctors, and the Slippery Slope Effect. Which means that people are afraid of doctors might abuse their rights and kill someone or doctors will not be actively treated to the patient. Second, the value of human life will decrease in this society, people will start to think that life is priceless because of you can choose euthanasia if you give up your life. Next, doctors should save people's life, not help people die or kill people. Last, the Slippery Slope Effect, like a snow ball, bigger and bigger. If there has the first person who has euthanize, there must be tones of people after few years.

According to the data that researcher collected, the general opinion in Taiwan

shows that about 75% people agree with the legalization of euthanasia and only about 5% people disagree it. As the technology advances, people's life can be extended by the medical equipment. Also, with the improvement of basic education, people have the very high awareness of their own rights and their life in nowadays. Thus, government should set up the standard of the requirements of euthanasia.

What's more, other countries will reference the standard from those which has legalized. Therefore, the researcher thinks that the requirements of the euthanasia cover age, conscious, judgement, the unbearable pain or be diagnosed with an incurable disease by the physicians. However, the government should start to think how old is the basic threshold for the age, such as the legal age of majority is 20, it could avoid parents to kill their own kids when they are desperate or when the kids have the major disease or the disability; what kind of people can choose euthanasia? People need to have a clearly conscious that can make decisions by their own and have the ability of judgement, except the PVS. People who are suffering unbearable pain or be diagnosed with an incurable disease by the physicians have the right to choose euthanasia. We will not know how painful it is, unless we got the same illness as the patient.

Finally, this research cannot only make our society better and better, but also raise up the awareness of the public to the issue of euthanasia. However, this issue has been argued for a few years, but it still cannot be legalized in many countries. Euthanasia is not a type of murder behavior, it is a way to help someone that who really need.

## Appendix 1

**. oprobit var10 var4**

Iteration 0: log likelihood = **-274.52102**  
 Iteration 1: log likelihood = **-271.52848**  
 Iteration 2: log likelihood = **-271.52753**  
 Iteration 3: log likelihood = **-271.52753**

Ordered probit regression

Number of obs = 282  
 LR chi2(1) = 5.99  
 Prob > chi2 = 0.0144  
 Pseudo R2 = 0.0109

Log likelihood = **-271.52753**

var10	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
var4	.253236	.1038954	2.44	0.015	.0496047 .4568673
/cut1	-1.390753	.4310965			-2.235687 -.5458197
/cut2	-1.193593	.4130116			-2.003081 -.3841053
/cut3	-.4844532	.3872552			-1.243459 .274553
/cut4	1.062348	.3880748			.3017353 1.822961

**. oprobit var11 var4**

Iteration 0: log likelihood = **-342.53365**  
 Iteration 1: log likelihood = **-340.60673**  
 Iteration 2: log likelihood = **-340.60662**  
 Iteration 3: log likelihood = **-340.60662**

Ordered probit regression

Number of obs = 282  
 LR chi2(1) = 3.85  
 Prob > chi2 = 0.0496  
 Pseudo R2 = 0.0056

Log likelihood = **-340.60662**

var11	Coef.	Std. Err.	z	P> z	[95% Conf. Interval]
var4	.1919833	.0979318	1.96	0.050	.0000405 .3839261
/cut1	-1.411536	.3955253			-2.186751 -.6363202
/cut2	-1.069791	.3781886			-1.811027 -.3285551
/cut3	.0172863	.3645287			-.6971768 .7317494
/cut4	1.088591	.3682488			.3668363 1.810345



## BIBLIOGRAPHY

- Aldersley, Miranda. "Dutch Girl, 17, Who Was Sexually Abused at 11 and Raped as a 14-Year-Old Is Legally Allowed to Die after Contacting 'End-of-Life' Clinic Because She Felt Her Life Was Unbearable Due to Depression." *Daily Mail*, June 4 2019.
- Annadurai, Dr. Kalaivani. "Euthanasia: Right to Die with Dignity." (2014).
- BBC. "Active and Passive Euthanasia." BBC,  
[http://www.bbc.co.uk/ethics/euthanasia/overview/activepassive\\_1.shtml](http://www.bbc.co.uk/ethics/euthanasia/overview/activepassive_1.shtml).
- . "Forms of Euthanasia." BBC,  
<http://www.bbc.co.uk/ethics/euthanasia/overview/forms.shtml>.
- CNN-Editorial-Research. "Physician-Assisted Suicide Fast Facts." *CNN*, June 11 2020.
- Department, Statistics. "Statistics of Causes of Death in 107 Years." Ministry of Health and Welfare, 2018.
- Dowbiggin, Ian. "A Merciful End: The Euthanasia Movement in Modern America." (2003).
- Emanuel, Ezekiel J. "What Is the Great Benefit of Legalizing Euthanasia or Physician-Assisted Suicide?". *The University of Chicago Press* (1999): 629-42.
- Green-Pedersen, Christoffer. "The Conflict of Conflicts in Comparative Perspective: Euthanasia as a Political Issue in Denmark, Belgium, and the Netherlands." (Apr., 2007).
- Hong Da, Zheng. "Taiwan Enters the "Aged Society" and Reaches the "Super-Aged Society" 8 Years Later." *Liberty Times Net*, 2018.
- Isabelle Marcoux, Brian L. Mishara and Claire Durand. "Confusion between Euthanasia and Other End-of-Life Decisions: Influences on Public Opinion Poll Results." *Canadian Public Health Association* (2007): 236.
- Jun-Yang, Wang. "The Choice at the End of Life-on the Current Situation and Prospects of Euthanasia in Taiwan." National Taiwan University Law Academics,  
<https://medium.com/ntulawazaleafestival/%E7%94%9F%E5%91%BD%E7%9B%A1%E9%A0%AD%E7%9A%84%E6%8A%89%E6%93%87-%E8%AB%87%E5%8F%B0%E7%81%A3%E5%AE%89%E6%A8%82%E6%AD%BB%E4%B9%8B%E7%8F%BE%E6%B3%81%E8%88%87%E5%B1%95%E6%9C%9B-6fb8b18813>.
- Justice, Ministry of. "Criminal Code of the Republic of China." edited by Ministry of Justice. Laws & Regulations Database of The Republic of China: Ministry of Justice.

- Kohl, Marvin. "The Morality of Killing : Sanctity of Life, Abortion, and Euthanasia." *New York: Humanities Press* (1974): 94.
- Kuhse, Helga. "Euthanasia Fact Sheet." <https://www.worldrtd.net/euthanasia-fact-sheet/>.
- Miao-Hua, Chen. "More Than 40,000 Died in a Year! Cancer Once Again Ranked First among the Top Ten Causes of Death." *World People News*, June 22 2019.
- Michael Manning, M.D. *Euthanasia and Physician-Assisted Suicide: Killing or Caring?* United States of America: Paulist Press, 1998.
- . *Euthanasia and Physician-Assisted Suicide: Killing or Caring?* United States of America: Paulist Press, 1998.
- . *Euthanasia and Physician-Assisted Suicide: Killing or Caring?* United States of America: Paulist Press, 1998.
- Povoledo, Elisabetta. "Vatican Reiterates Its Opposition to Euthanasia and Assisted Suicide." *The New York Times*, Sep. 22 2020.
- Research, National Academy for Educational. "Cardiopulmonary Resuscitation (Cpr)." <http://terms.naer.edu.tw/detail/1294722/>.
- Ru-Chao, Shan ; Zhuo-Ran, Deng ; Wen-Chu, Cheng ; Ru-Yi, Li. "Euthanasia: The Right to Live or the Dignity of Death?" *Daily News*, January 28 2015.
- Tate, B. J. Ward and P. A. "Attitudes among Nhs Doctors to Requests for Euthanasia." *BMJ: British Medical Journal* (May 21 1994): 1332-34.
- Welfare, Ministry of Health and. "Hospice Palliative Care Act." edited by MINISTRY OF JUSTICE THE WORKING GROUP OF THE R.O.C LAWS & REGULATIONS DATABASE. Laws & Regulations Database of The Republic of China: Ministry of Health and Welfare, 2013.
- . "Patient Right to Autonomy Act." edited by Ministry of Justice The Working Group of the R.O.C Laws & Regulations Database. Laws & Regulations Database of The Republic of China: Ministry of Health and Welfare, 2019.
- William C. Shiel Jr., MD, FACP, FACR. "Medical Definition of Active Euthanasia." <https://www.medicinenet.com/script/main/art.asp?articlekey=7422>.
- . "Medical Definition of Hippocratic Oath." <https://www.medicinenet.com/script/main/art.asp?articlekey=20909>.
- Yu Hua, Chen. "Make a Reservation to My Good Farewell." *Business Today*, June 2 2016.
- Zi-Wei, Liu. "The Last Message from Taiwan's Former Anchor Frank Fu before the "Euthanasia"." *BBC News*, June 6 2018.