

# Community perspectives on end-stage of life, assisted dying And religion

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## Executive Summary

This paper reports on nationally representative surveys concerned with peoples' views (50 years and over (Boomers) and 18–35 year olds (Millennials)) on the questions of euthanasia (in the context of terminal illness) and assisted dying. Given the ethical nature of current public debate concerning this policy issue, respondent perspectives by religious identification were also documented.

The study found that as a whole some two-thirds (65%) of Boomers and 58% of Millennials support the legalization of euthanasia. There was, however, a high level of uncertainty in the community around this issue. The issue was in turn examined within the context of religious belief or religious affiliation. Approximately one third of respondents reported a formal religious affiliation. Of those with a religious affiliation, 48% of Boomers and 39% of Millennials supported the legalization of euthanasia. Again, for both groups, uncertainty remained an issue with some while a further 28% of Boomers and 40% of Millennials reporting uncertainty or neutrality on these issues. A strong majority of Roman Catholic, Anglican and Uniting Church members supported the legalization of euthanasia while members of smaller Christian denominations opposed the legalization of euthanasia.

Further analysis of the data found that peoples' positions of the legalization of euthanasia shifted with regards the context within which such a procedure may be offered. The more specific the context (e.g. euthanasia offered as a solution to people who have a terminal condition *or* extreme physical illness; enables a person to die with dignity) was with regards access to euthanasia, the greater was support from community. When better contextualized, it is likely that some 90% of Boomers and 70% of Millennials would support the legalization of euthanasia.

While people with a specific religious affiliation make up approximately one third of the community, this cohort did not report a unified position with regards access to euthanasia, when such an offering is contextualized. When examined in this manner, opposition to contextualized euthanasia amongst those with a religious affiliation stood at about half of this group, or 15% of the population.

It is evident from this study that there is strong community support for the legalization of euthanasia which provides a voluntary, dignified, pain free death, where such a service is provided in the context of terminal, end stage disease.

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## Methodology and data management

The data reported in this paper were collected by the independent Australian market research company, *instinct and reason*. Since 2013, *instinct and reason* has conducted a quarterly on-line, social survey monitoring socio-economic issues impacting on people aged over 55 years (*Boomers*). In 2017, *instinct and reason* commenced a quarterly on-line, social survey monitoring socio-economic issues impacting on people aged 18 – 35 years (*Millennials*). Each of the surveys were centred around a group of core questions that are repeated each time a study is fielded. Each study also provides space for a *deep delve* into a specific issue of interest. Deep delves address key social issues of the day. As various jurisdictions are presently addressing the question of legalising assisted, end of life dying, a deep delve on this issue was timely since it would provide the public with an independent picture of where Australians stand on this issue. Given the extent of debate around this issue, particularly with regards religion, questions concerning religious identification were therefore included among the demographic items in both *Boomer* and *Millennial* surveys.

The results of the study were weighted to the Australia population using demographics from the Australian Bureau of Statistics.

The sample size for the *Boomer* study was 1,004 and for the *Millennials*, 500. These data were collected in May, 2018. Analysis of these data demonstrated showed that some distinct demographic differences exist between the respective samples. Specifically, *Millennials* showed a greater diversity of religious identification than did *Boomer* respondents. As a consequence of this outcome, analysis concerned with respondent perspectives on euthanasia by specific religious identification or affiliation, by study group, was not always possible, as the specific religious groupings did not readily align, or align in sufficient numbers so as to enable meaningful analysis.

The results of these studies are reported with regards overall responses to a specific question, by study group. These data are in turn reported by overall religious identification, if any, and then by specific religious affiliation, where one is reported. Larger than expected numbers of respondents answered *don't know*, *not sure*, or *uncertain*, to a variety of questions. This occurrence was addressed in two ways. First, these responses are reported in their own right, as they reflect a genuine and systematic outcome from the study. Second, given the consistent and indeed high level of such responses, the data were subjected to cluster analysis, with a view to trying to better understand where respondents stood with regards the legalisation of euthanasia, overall.

Cluster analysis is an exploratory statistical procedure which links respondents together on the basis of the extent to which they are alike to each other, on variables of interest. The analysis also provides an indication as to the variables which most strongly lie behind respondents thinking. Such an analysis is conducted in two-steps. The first step enables one to create a dot plot of cluster groupings by conducting a basic or hierarchical cluster analysis. This procedure yields an agglomeration schedule of co-efficients between the respective respondents. These co-efficients are in turn graphed using a dot plot. Visual analysis of a dot plot enables one to estimate how many groupings may exist in the data. Alternately, one can theoretically determine the existence of three groupings. For example,

this analysis is primarily concerned with the existence of three groups in the data, whether people agree, disagree or are uncertain about the issues of interest. In an ideal world, the dot plot and the theoretical determination co-inside. The second step in the process involves analyzing the data using the number of identified (or theorized) clusters and examining how respondents group with regards their perspectives on the issues overall. This procedure is called K means cluster analysis. The results of this second analysis are usually presented as a bar graph. The graph is read as follows:

- A score of zero represents an average or mean response
- Scores above zero represent a positive response on the issue (the steps above zero can be likened to standard deviations away from the mean)
- Scores below zero represent a positive response on the issue (the steps below zero can be likened to standard deviations away from the mean)
- The longer the bar (above or below zero), the more strongly held is the position by these respondents.

These analyses also provide a descriptive statistic which indicates the issues which have likely determined the overall result.

*instinct and reason* is a fully accredited to conduct market and social research as per ISO 20252 and ISO 26362<sup>1</sup>. David Donnelly, Director is certified by the by the Australian Market and Social Research Society (AMSRS) as a Qualified Professional Market Researcher (QPMR)<sup>2</sup>. The research reported in this study is compliant with the aforementioned research standards and processes, the Privacy Act<sup>3</sup> and AMSRS' Research Code of Conduct<sup>4</sup>.

The opportunity is taken to thank *instinct and reason* for enabling me to access these data for the purposes of this paper. The opportunity is taken to acknowledge the contribution and support of *instinct and reason* staff including Eric Wu, Leia Bennis and Georgia Price.

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<sup>1</sup> <https://www.amsrs.com.au/research-company-directory/search/?command=viewEntityContact&entityType=1&entitySerial=2684&membershipSerial=9020>

<sup>2</sup> <https://www.amsrs.com.au/qpmr>

<sup>3</sup> <https://www.amsrs.com.au/professional-standards/privacy-market-social-research-code-2014>

<sup>4</sup> <https://www.amsrs.com.au/professional-standards/code-of-professional-behaviour>

## Survey demographics

Table 1 provides an overview of the sample that participated in this study, by groups (Boomers and Millennials). The proportional representation of respondents is consistent with national population data<sup>5</sup>.

*Table 1: Respondents by jurisdiction*

State	Boomers (%)	Millennials (%)
New South Wales	33	32
Victoria	25	26
Queensland	19	19
South Australia	8	7
Western Australia	10	11
Tasmania	3	2
ACT	1	2
NT	1	1

Table 2 provides with regards provides data on the regional domicile of community participating respondents. The majority of respondents, as would be expected, also live in urban and/or regional centres<sup>6</sup>.

*Table 2: Respondents by locality*

Locality	Boomers (%)	Millennials (%)
Urban	57	56
Other urban	31	32
Town	7	7
Rural	5	5

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<sup>5</sup> <http://www.abs.gov.au/ausstats/abs@.nsf/mf/3101.0>

<sup>6</sup>Hogan, A.; Young, M, (eds) (2015) Rural and regional futures. Routledge, London. 352 pages.

Tables 3 and 4 report respondents by their respective age groups. People aged over 75 years were under-represented in this study.

*Table 3: Boomers by age group*

<b>Boomers</b>	<b>%</b>
50-54 years	18
55-64 years	37
65-74 years	34
75+ years	11

*Table 4: Millennials by age group*

<b>Millennials</b>	<b>%</b>
18-24 years	39
25-29 years	30
30-34 years	31

Table 5 provides data on respondents by gender. Males were slightly under-represented among Boomers in this study<sup>7</sup>.

*Table 5: Respondents by Gender*

<b>Gender</b>	<b>Boomers (%)</b>	<b>Millennials (%)</b>
Male	48	49
Female	52	49
Non-binary	0	1

The majority of Boomers reported their work status as retired, while a majority of Millennials were in full time employment or studying. In conducting this survey respondents were asked their religious identification, which is reported in Table 6. A notable difference is evident. Compared to the Boomers, Millennials are more divided with regards belief with greater proportions being either religious or atheist.

*Table 6: Respondents by religious perspective*

<b>State</b>	<b>Boomers (%)</b>	<b>Millennials (%)</b>
Religious	29	35
Spiritual	28	16
Agnostic	15	10
Athiest	21	34
Other	7	4

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<sup>7</sup> <http://countrymeters.info/en/Australia>



Within the grouping of religious identification respondents identified were asked to indicate their religious affiliation. These data are presented in Table 7. A notable difference is evident. Boomers in this study predominantly identified with what may be termed the 'sandstone' Christian churches, or other Christian congregations. By contrast, Millennials reported a lower level of identification with the sandstone churches and a higher level of identification with Asian or Islamic traditions.

*Table 7: Respondents by religious affiliation*

<b>State</b>	<b>Boomers (%) (n=288/988)</b>	<b>Millennials (%)</b>
Roman Catholic	36	32
Anglican	18	10
Uniting Church	16	
Asian traditions		17
Muslim		10
Other Christian	22	26
Others	8	14

## Part 1: Perspectives on the legalization of euthanasia.

### Should euthanasia be legalized?

In keeping with the primary aims of this study, participants were asked whether or not they thought euthanasia should be legalized. Table 8 shows that some two-thirds (65%) of Boomers held the view that euthanasia should be legalized while approximately a quarter of the population remains uncertain.

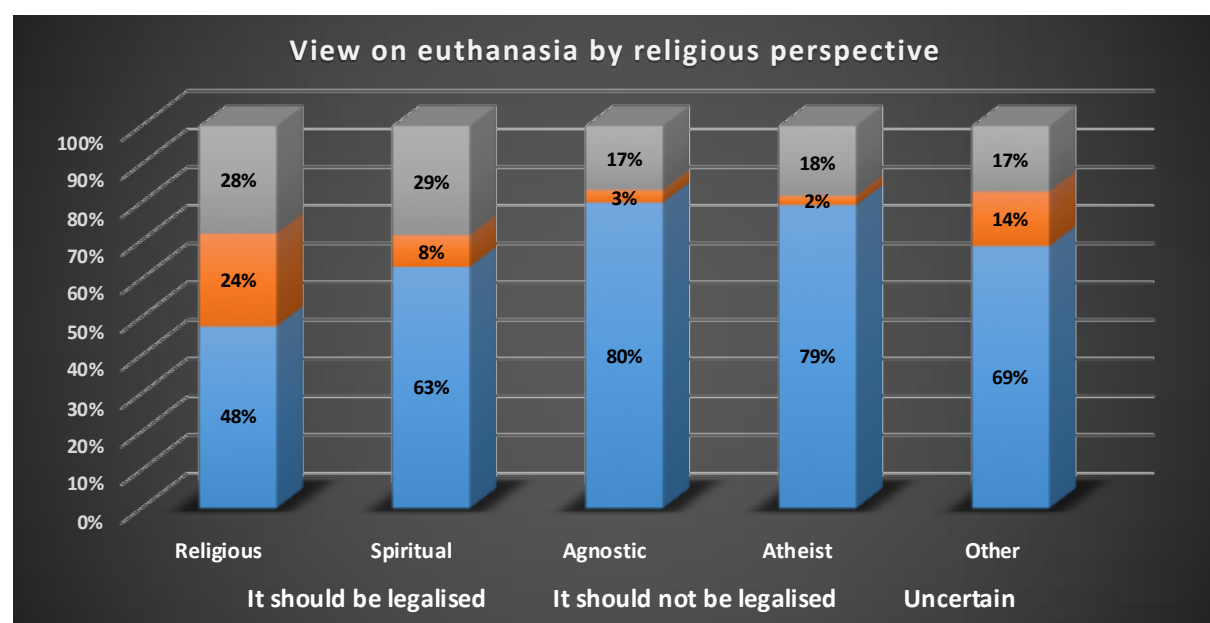
Table 8: Should euthanasia be legalized?

Position	Boomers (%)	Millennials (%)
It should be legalised	65	58
It should not be legalised	11	12
Uncertain	24	30

### Boomers view on the legalization of euthanasia by religion

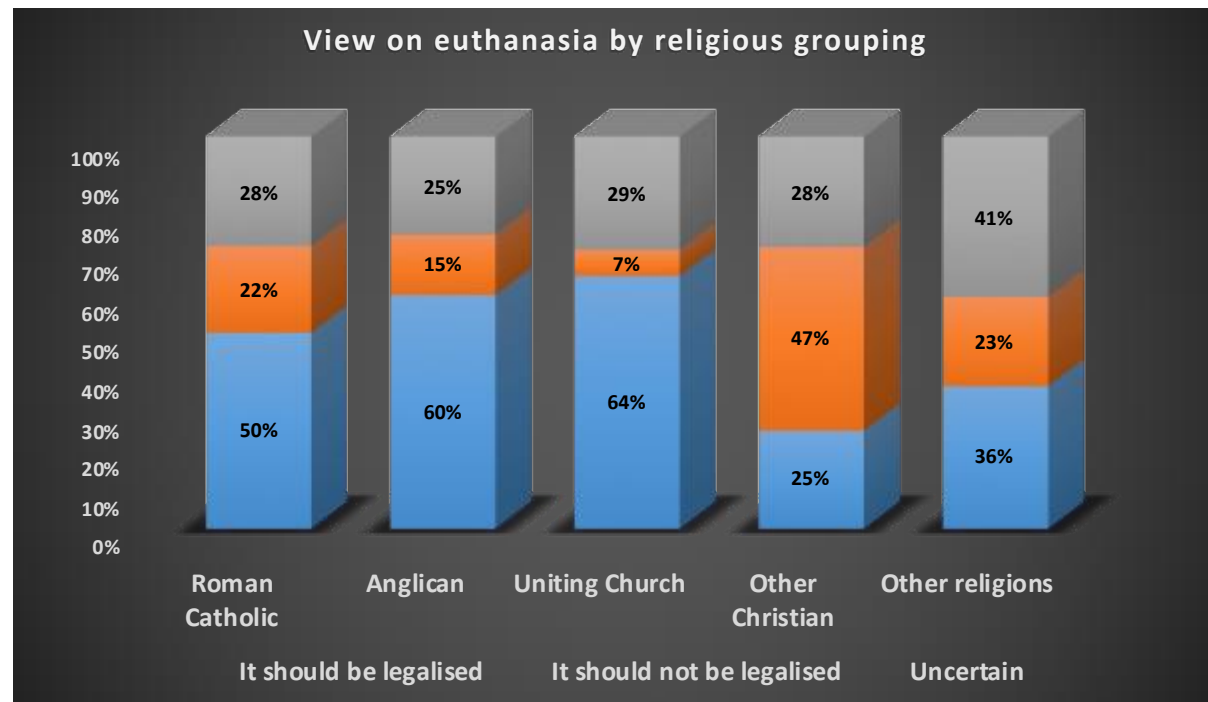
Support for euthanasia varied with regards Boomer's religious perspectives or church identification. Figure 1 shows that among Boomers, a comparatively high proportion of religious people support the legalization of euthanasia (48%) while a further 29% remain uncertain. People who identified themselves as agnostic (80%) or atheist (79%) expressed strongest support for the legalization of euthanasia.

Figure 1: Respondents' views on euthanasia by religious identification - Boomers



Among the Boomers identifying as religious, a majority of Roman Catholic, Anglican and Uniting Church members support the legalization of euthanasia (see Figure 2). By contrast, a majority of people identifying as members *other Christian* denominations (though proportionally fewer in number) oppose the legalization of euthanasia. A majority of members of non-Christian traditions do not support the legalization of euthanasia. Notably, approximately one quarter of respondents expressed uncertainty about the legalization of euthanasia.

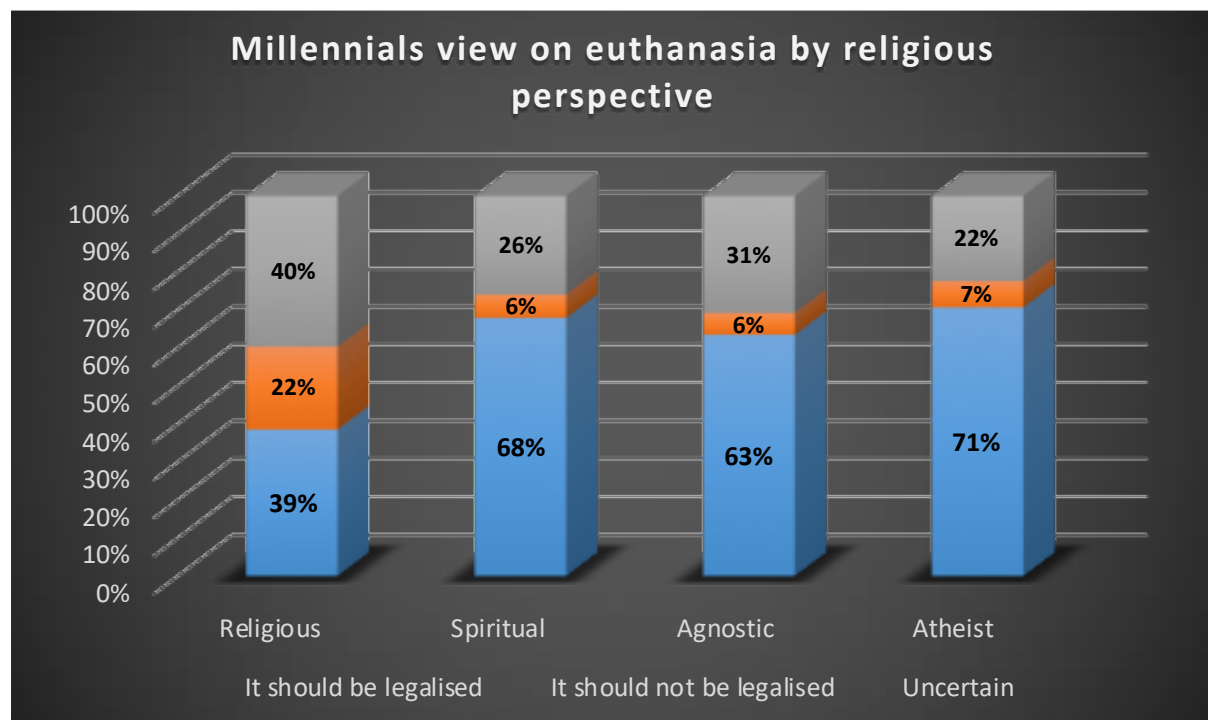
Figure 2: Respondents' views on euthanasia by religious sub-grouping - Boomers



## Millennials view on the legalization of euthanasia by religious perspective

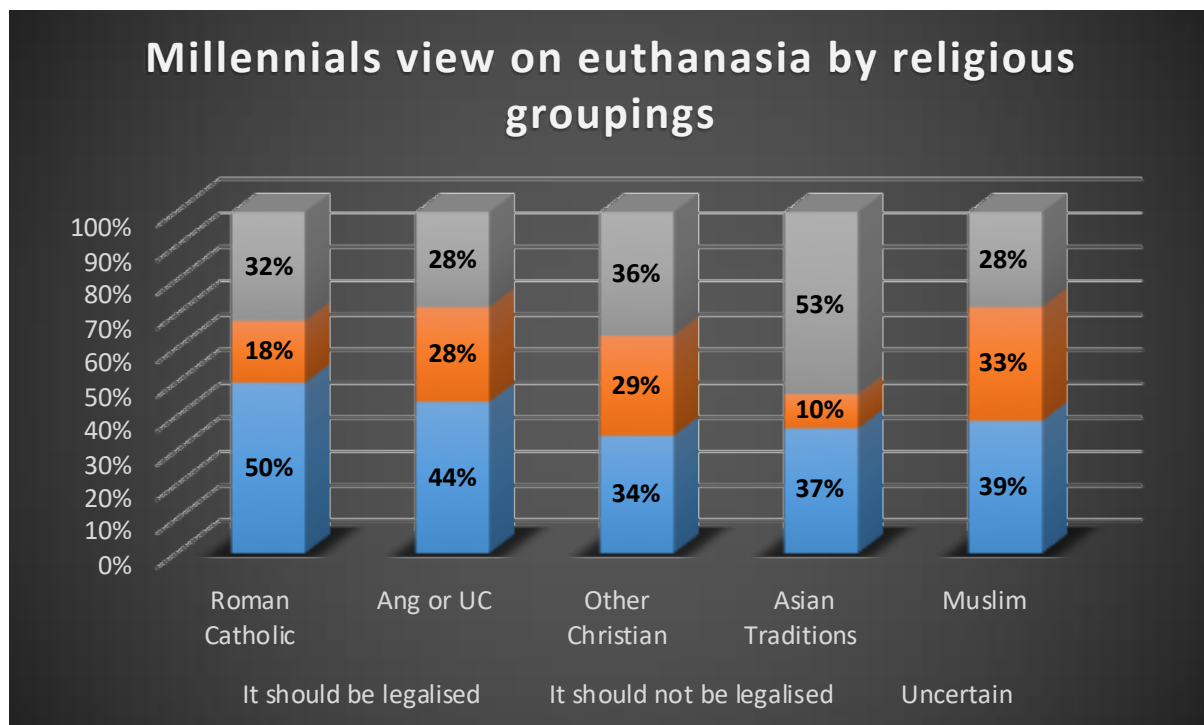
Figure 3 shows that among Millennials, 39% of religious people supported the legalization of euthanasia while a further 22% remained uncertain. Among the remaining groups, some two-thirds of people who identified as spiritual (68%) or agnostic (63%) supported the legalization of euthanasia along with a majority of people (71%) identified as atheist.

Figure 3: Respondents' views on euthanasia by religious identification - Millennials



While half (50%) of the Roman Catholic Millennial respondents supported the legalization of euthanasia, support for such legislation was lower across the remaining religious groupings. The proportion of respondents who were opposed to the legalization did not exceed one third (e.g. either Anglican, Uniting or Muslim identification). Moreover, the level of uncertainty among all groups was high, averaging approximately one-third of all respondents.

Figure 4 Respondents' views on euthanasia by religious affiliation - Millennials



Euthanasia in the case of terminal *and* extreme illness.

Respondents were subsequently asked their views on the legalization of euthanasia on the context of a person being terminally and extremely ill. Table 8 shows that within this context, 78% of Boomers believed that euthanasia was an acceptable solution for a person who is terminally and extremely ill.

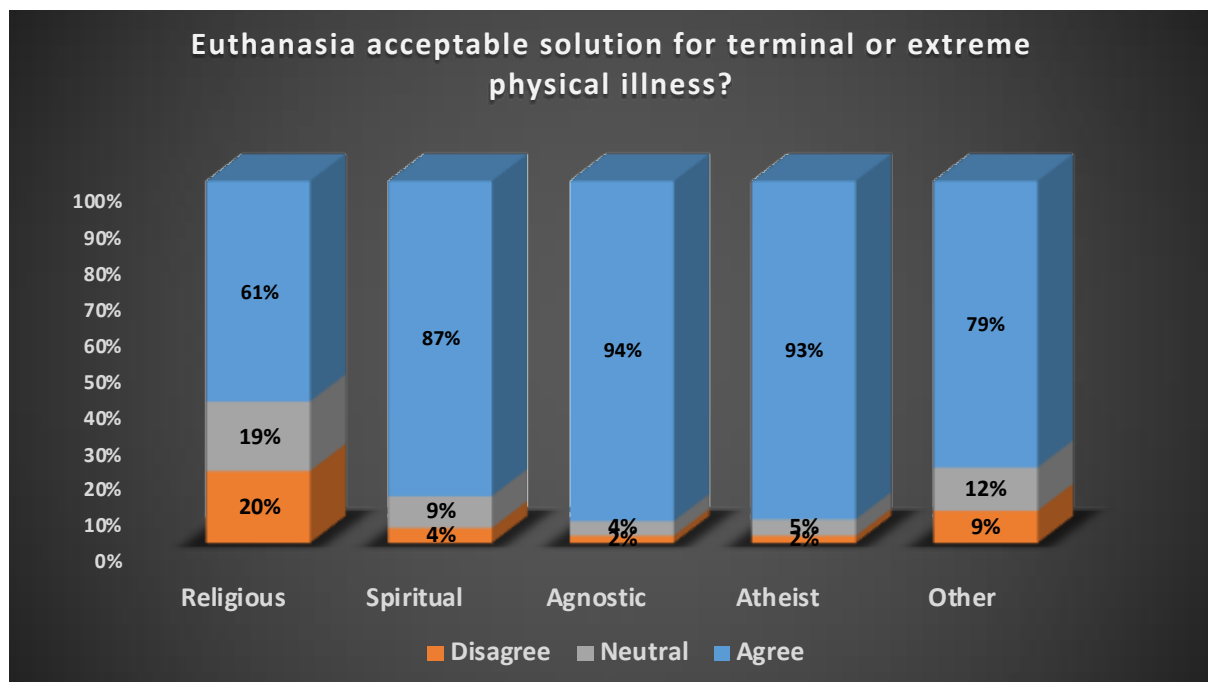
Table 8

Position	Boomers (%)	Millennials (%)
Agree	78	69
Disagree	8	7
Neutral	10	17
Don't know; Not sure	4	7

## Boomers view on euthanasia in the case of terminal or extreme illness by religion

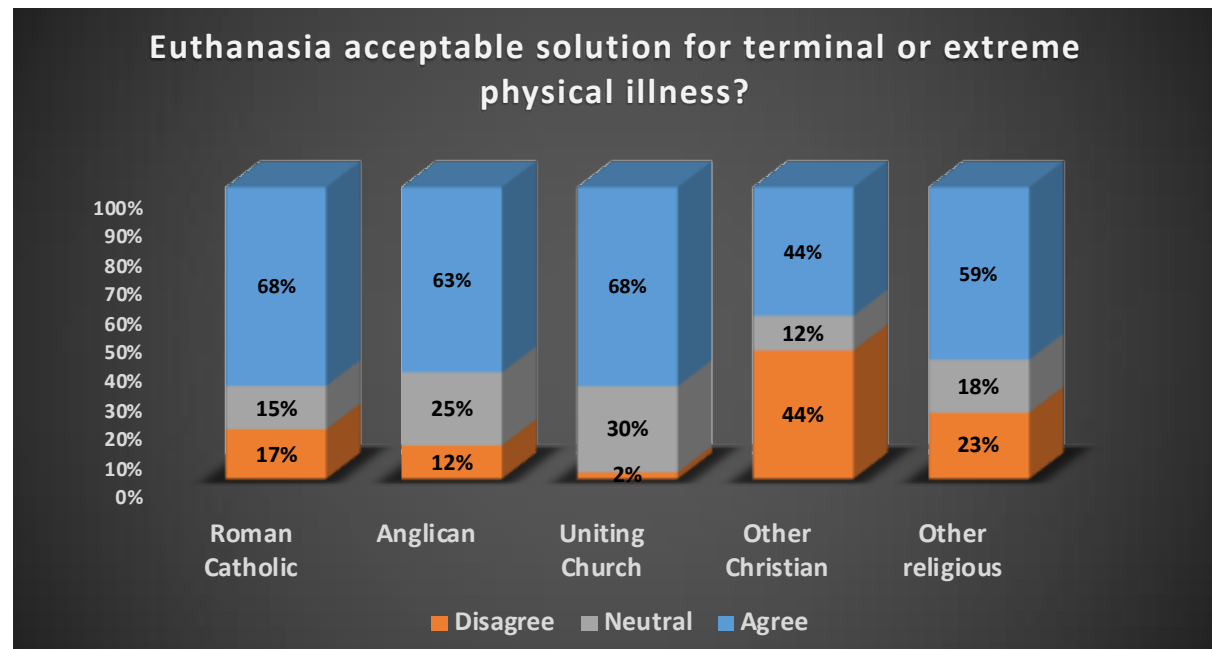
Figure 4 demonstrates that among Boomers support for euthanasia within the context of terminal illness was supported by some two-thirds of religious people (61%) and almost unanimously by members of three of the other groupings.

Figure 4: Euthanasia as an acceptable solution for terminal or extreme physical illness by religious identification - Boomers



For Boomers, Figure 5 shows that the level of two-thirds support for end-of-life stage euthanasia is generally evident amongst Roman Catholic, Anglican, Uniting Church and other religious peoples, save for members of *other Christian* churches.

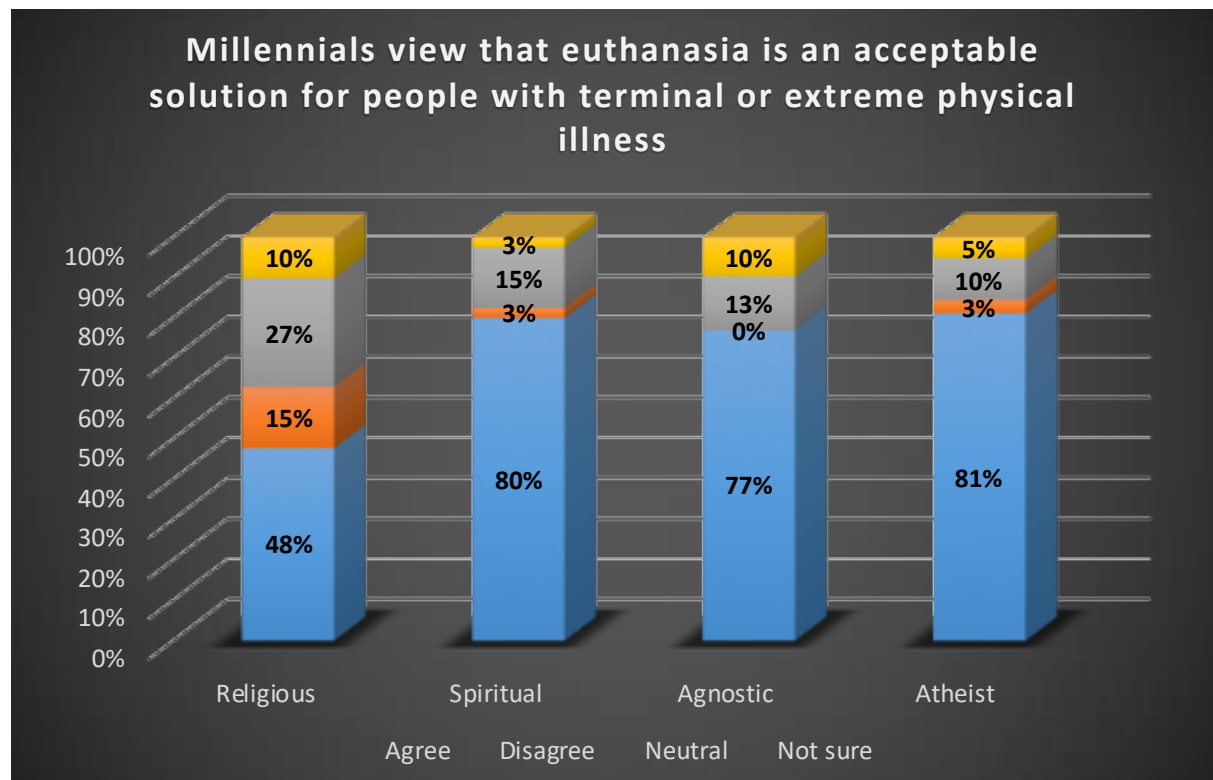
Figure 5: Euthanasia as an acceptable solution for terminal or extreme physical illness by religious sub-grouping - Boomers



## Millennials view on euthanasia in the case of terminal or extreme illness by religion

Figure 6 shows that among Millennials, support for euthanasia within the context of terminal illness was strongly supported by all groups, except for those who identified as religious. Among people holding a religious perspective, 15% are against the legalization of euthanasia within the context of terminal illness, while 37% were either neutral or unsure.

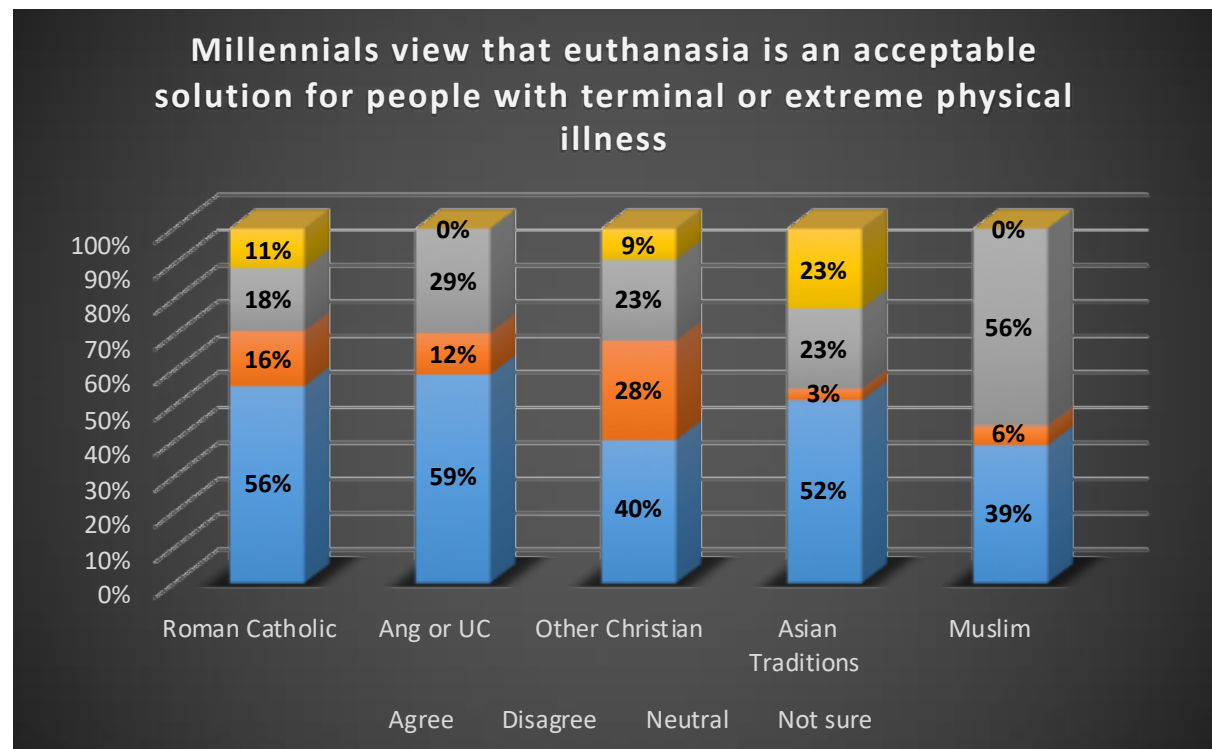
*Figure 6: Euthanasia as an acceptable solution for terminal or extreme physical illness by religious identification - Millennials*





For Millennials, Figure 7 shows that a majority of Roman Catholic, Anglican and Uniting and members of Asian religious traditions support the legalization of euthanasia in the context of terminal or extreme physical illness. Save for members of Other Christian traditions (28% against), neutrality and uncertainty are common responses.

Figure 7: Euthanasia as an acceptable solution for terminal or extreme physical illness by religious sub-grouping - Millennials



## Can assisted suicide enable people to die with dignity?

Figure 12 provides respondents' views on the issue as to whether access to assisted suicide may enable a person to die with dignity. A solid majority (76%) of Boomers agreed with the idea that assisted suicide enabled people to die with dignity. The level of agreement among Millennials was lower than Boomers, with Millennials reporting comparatively high levels of neutrality or uncertainty.

Table 9: Can assisted suicide enable people to die with dignity?

Position	Boomers (%)	Millennials (%)
Agree	76	59
Disagree	8	1
Neutral	12	21
Don't know; Not sure	4	9

## Boomers views - can assisted suicide enable people to die with dignity?

Figure 8 shows that among Boomers there was a comparatively high level of support (approximately 85%) across the community, except for those who identified with an institutionalized religion (57%).

Figure 8: Assisted suicide can enable a person to die with dignity (agree/disagree) by religious affiliation - Boomers

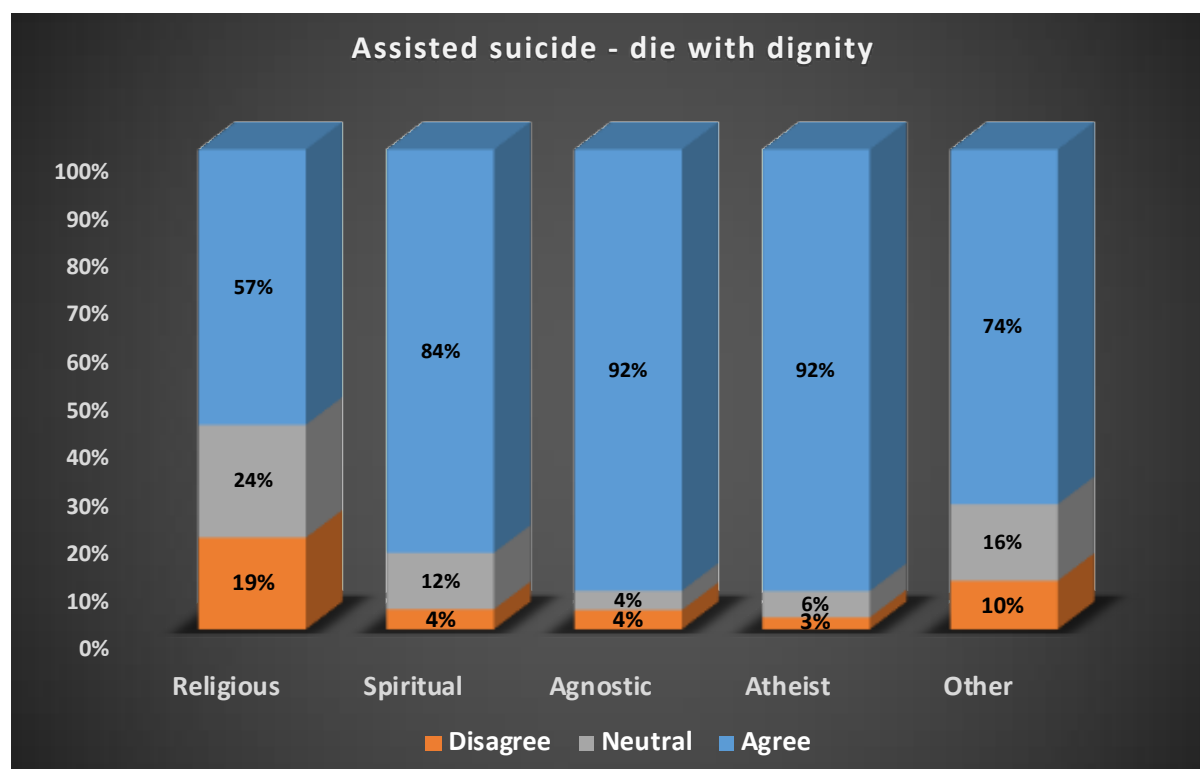
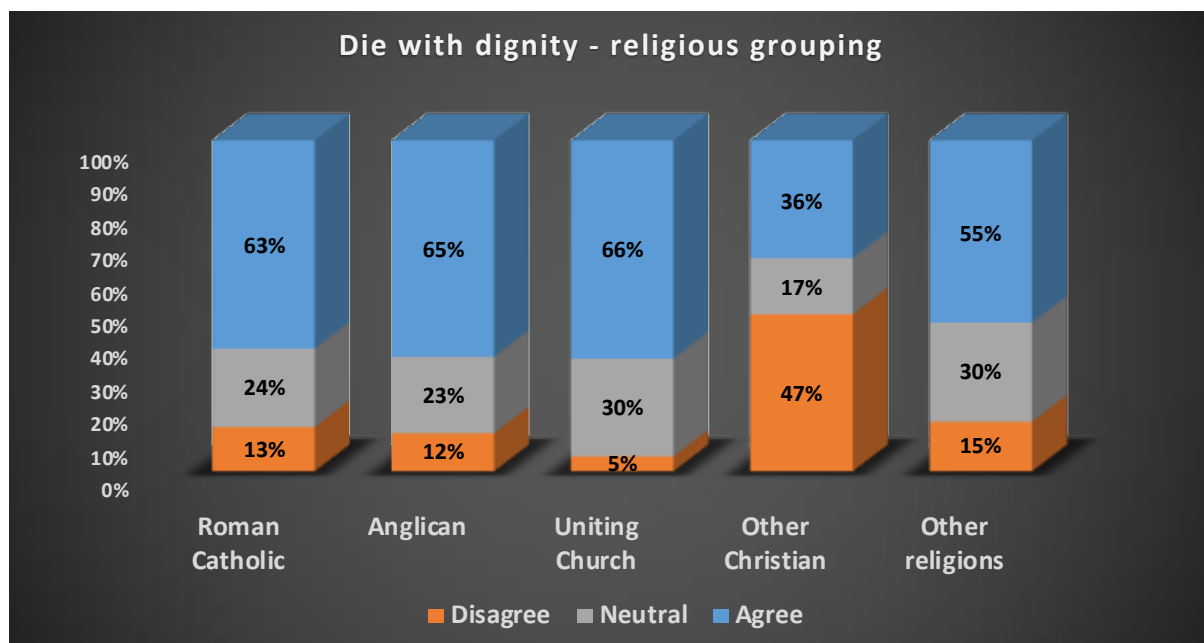


Figure 9 reports support for the contention that assisted suicide enables a person to die with dignity. Among Boomers, people who identified with a sandstone Christian religion, as well as members of “other religions”, were more supportive of the legalization of assisted suicide than other members of the community. That said, Figure 9 shows that a majority (47%) of members of ‘Other Christian’ denominations were opposed to the contention that assisted suicide enables a person to die with dignity. Notably, the proportion of people who are uncertain about the issue is consistently between one quarter and one third of respondents.

*Figure 9: Assisted suicide can enable a person to die with dignity (agree/disagree) by religious sub-grouping - Boomers*



## Millennials views - can assisted suicide enable people to die with dignity?

Among Millennials, Figure 10 shows that a majority of people who identify as agnostic (67%) or atheist (74%) agreed that assisted suicide enables a person to die with dignity. While 21% of Millennials who identify as religious did not agree that assisted suicide enables a person to die with dignity, those who held neutral or uncertain views again ranked highly (e.g. 38% of those identifying as spiritual and 39% % of those identifying as religious).

Figure 10: Assisted suicide can enable a person to die with dignity (agree/disagree) by religious affiliation - Millennials

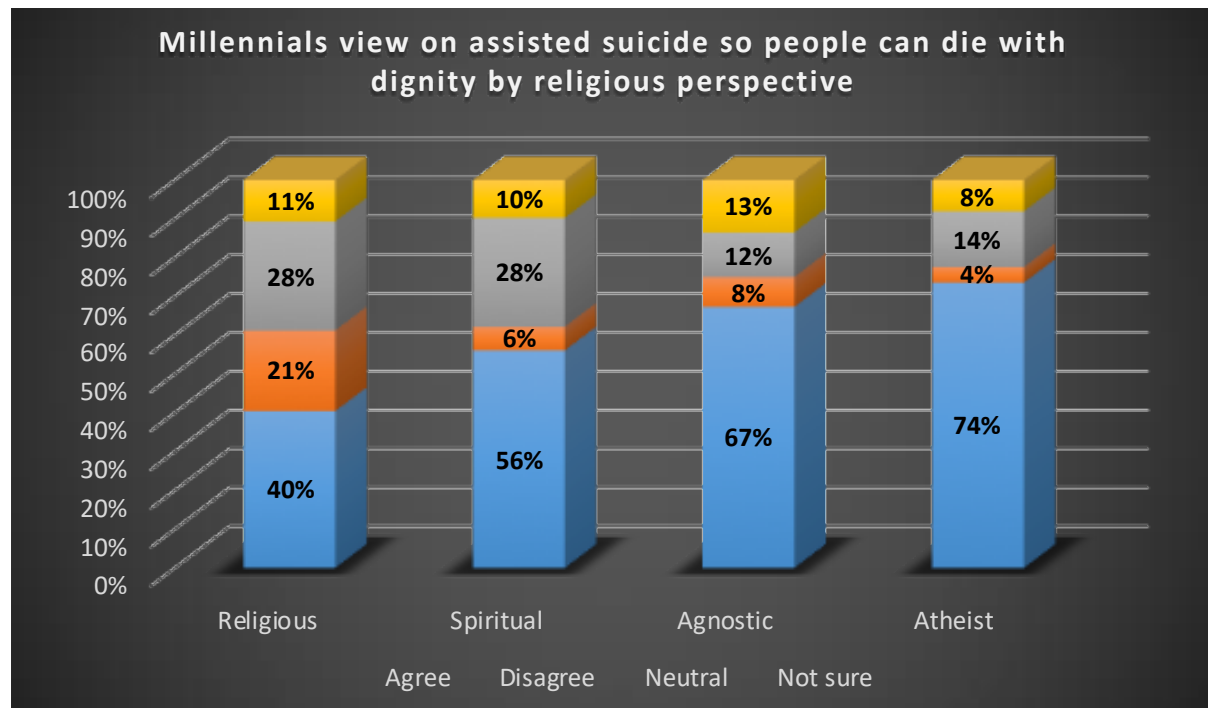
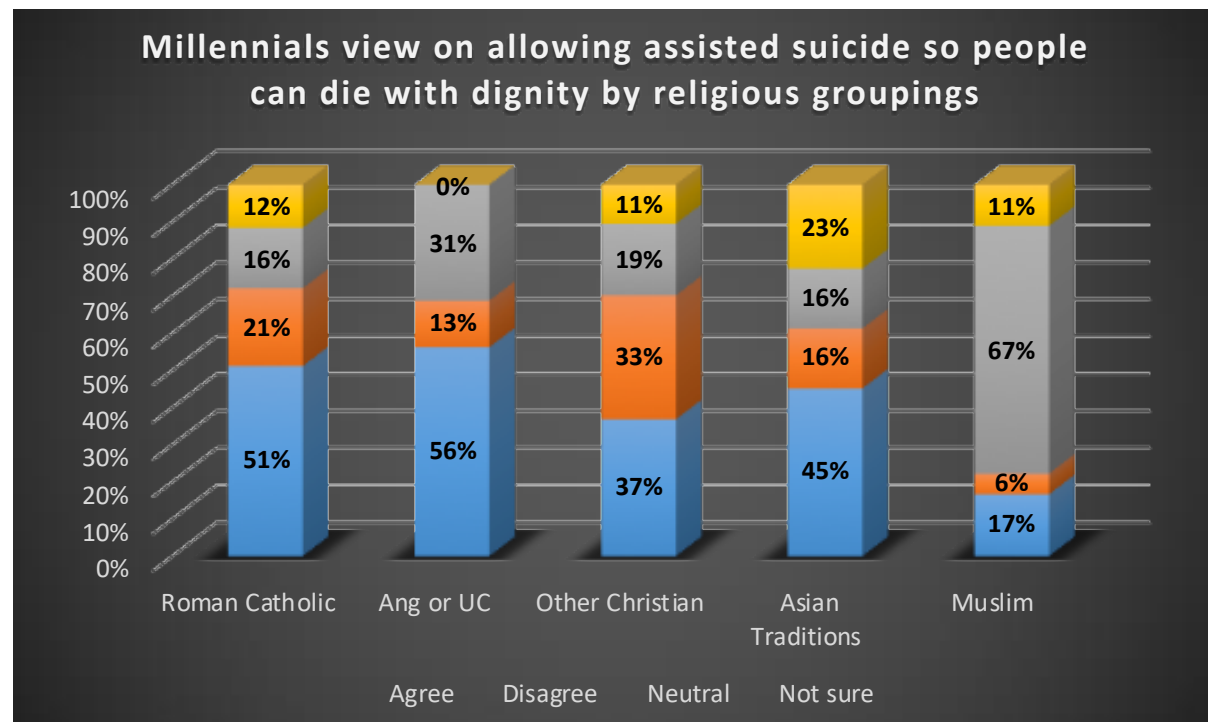


Figure 11 adds insight to the data reported above. First, a majority of members of the sandstone Christian traditions essentially agreed that assisted suicide enables a person to die with dignity. By contrast, 33% of members of ‘other Christian’ traditions disagree with the view that assisted suicide enables a person to die with dignity.

Figure 11: Assisted suicide can enable a person to die with dignity (agree/disagree) by religious sub-grouping - Millennials



### Should euthanasia be legalized for anyone who wants it?

Table 10 provides data on respondents’ perspectives on the legalization of euthanasia in any circumstance. Within this scenario, just under half the Boomers (45%) supported its legalization while 20% remained neutral on the issue. Only one third (36%) of Millennials agreed the legalization of euthanasia in any circumstance with another third (33%) expressing neutrality or uncertainty.

Table 10: Should euthanasia be legalized for anyone who wants it?

Position	Boomers (%)	Millennials (%)
Agree	45	36
Disagree	28	31
Neutral	20	22
Don't know; Not sure	7	11

## Boomers - Should euthanasia be legalized for anyone who wants it?

Among Boomers, Figure 12 shows that support for the legalization of euthanasia for anyone who wants to end their life was strongest amongst those who identify as agnostic (63%) or atheist (65%). Support for euthanasia for anyone who wants to end their life had less support from people of a spiritual (46%) or religious (31%) identification.

Figure 12: Euthanasia should be legalized for anyone who wants to end their life (agree/disagree) by religious affiliation-boomers

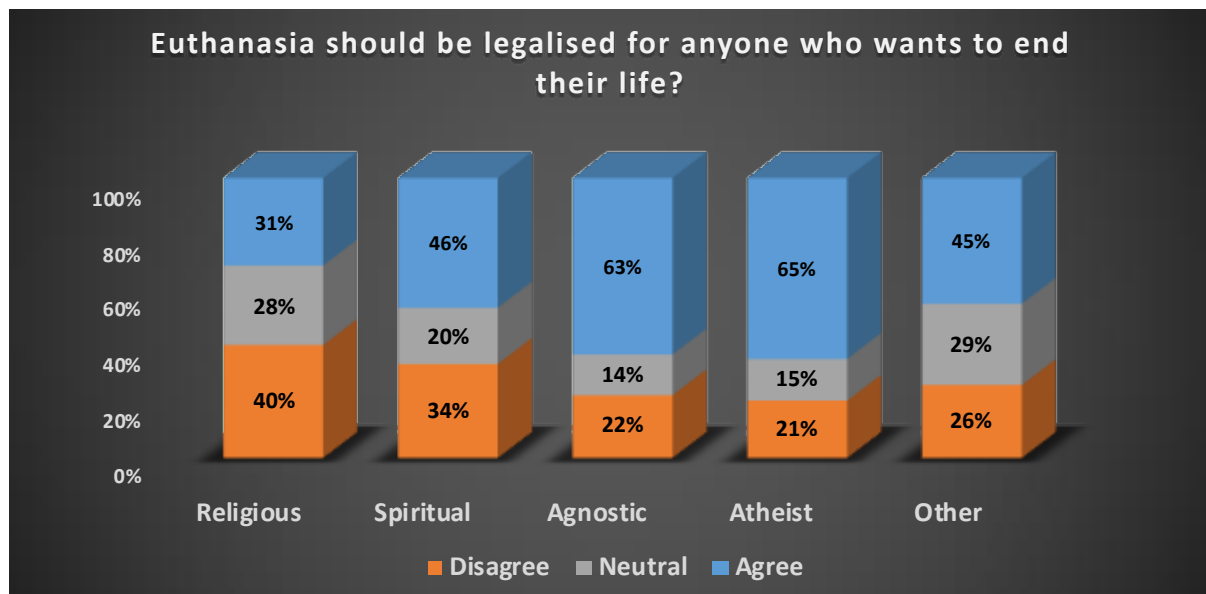
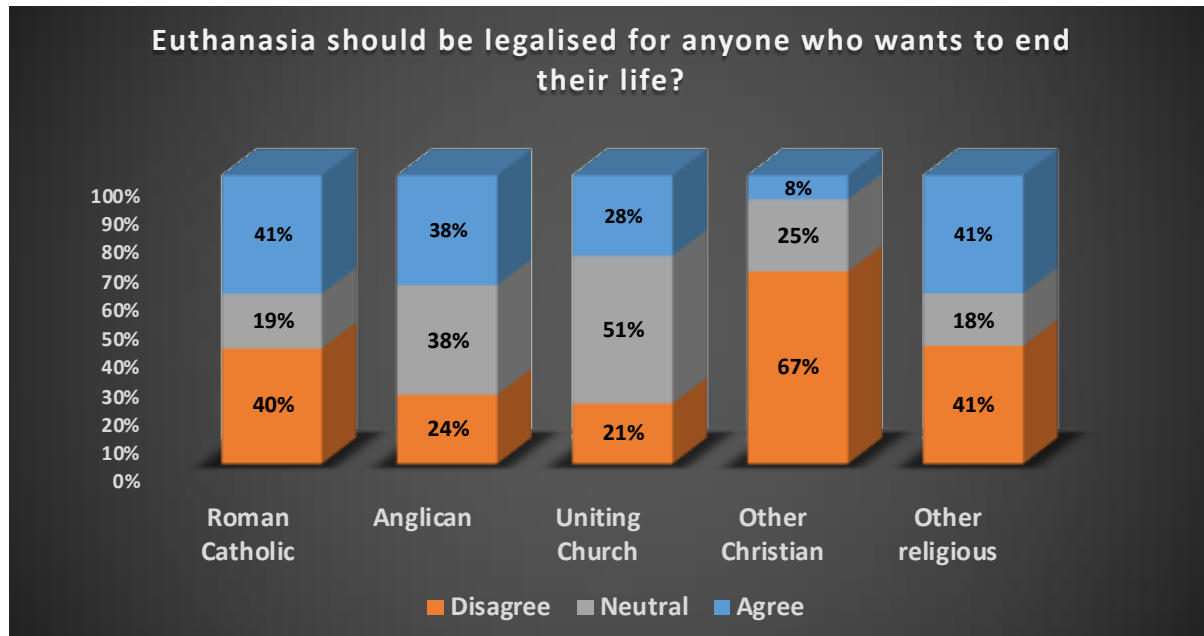


Figure 13 concerns Boomer support for legalizing euthanasia for anyone who wants to end their life, taking into account any religious affiliation. The data showed that support was higher among Roman Catholics, Anglicans and members of 'other religious' groupings. A majority (67%) of members of 'Other Christian' traditions did not support legalizing euthanasia for anyone who wants to end their life.

*Figure 13: Euthanasia should be legalized for anyone who wants to end their life (agree/disagree) by religious sub-grouping- Boomers*



## Millennials - Should euthanasia be legalized for anyone who wants it?

Among millennials, Figure 14 shows that support for the legalization of euthanasia for anyone who wants to end their life for Millennials by religious perspective. A minority of Millennials who identified as agnostic (40%) or atheist (36%) supported the legalization of euthanasia on this basis. However, these respondents were in larger numbers than those who expressly disagreed. Once again some on third of these respondents were either neutral or not sure.

Figure 14: Euthanasia should be legalized for anyone who wants to end their life (agree/disagree) by religious affiliation-boomers

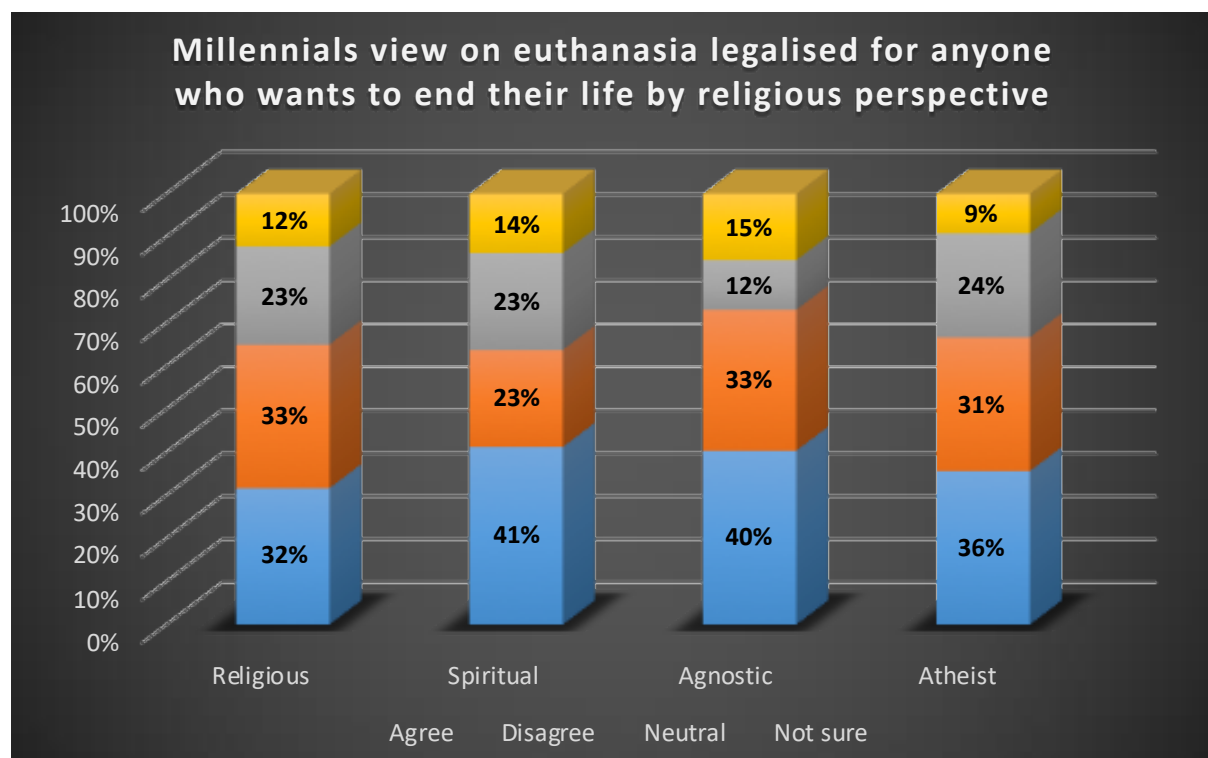
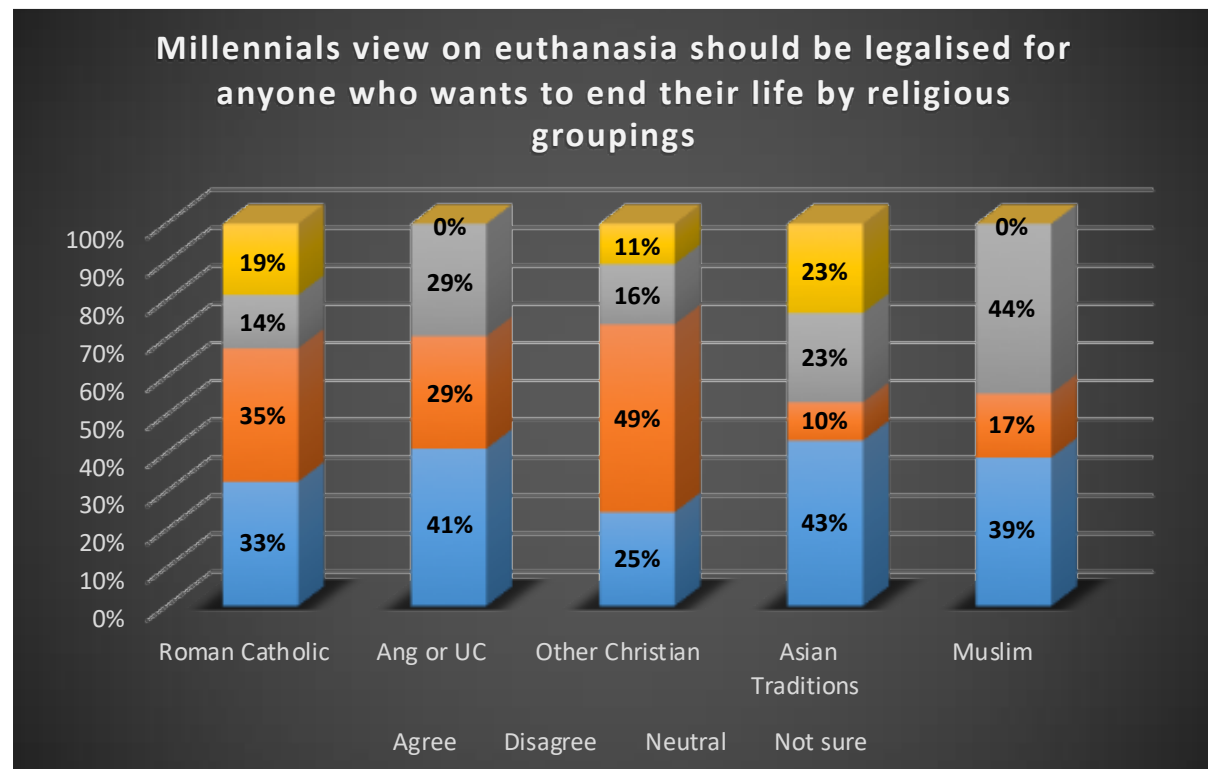




Figure 15 shows the perspectives of Millennials with a religious identification on the question as to whether euthanasia should be legalized for anyone who wants to end their life. Members of 'Other Christian' traditions reported a near majority (49%) who disagreed with this proposal. Among all other groups at least one in three were supportive of the proposal while as many again were either neutral or uncertain.

Figure 15: Euthanasia should be legalized for anyone who wants to end their life (agree/disagree) by religious sub-grouping- Boomers



## Does a person have the right to decide to end their life?

Table 11 provides data on respondents' perspectives on the question as to whether a person has the right to end their life. Some two-thirds (66%) of Boomers and about half (54%) of Millennials agreed with this idea.

Table 11: Does a person have the right to decide to end their life

Position	Boomers (%)	Millennials (%)
Agree	66	54
Disagree	12	14
Neutral	16	24
Don't know; Not sure	6	8

## Boomers - Does a person have the right to decide to end their life?

Figure 16 shows that half (50%) of people identifying as religious supported the contention that a person has the right to end their life, whereas support for this contention was much higher amongst other community groups.

Figure 16: Does a person have the right to end their life (agree/disagree) by religious affiliation - Boomers

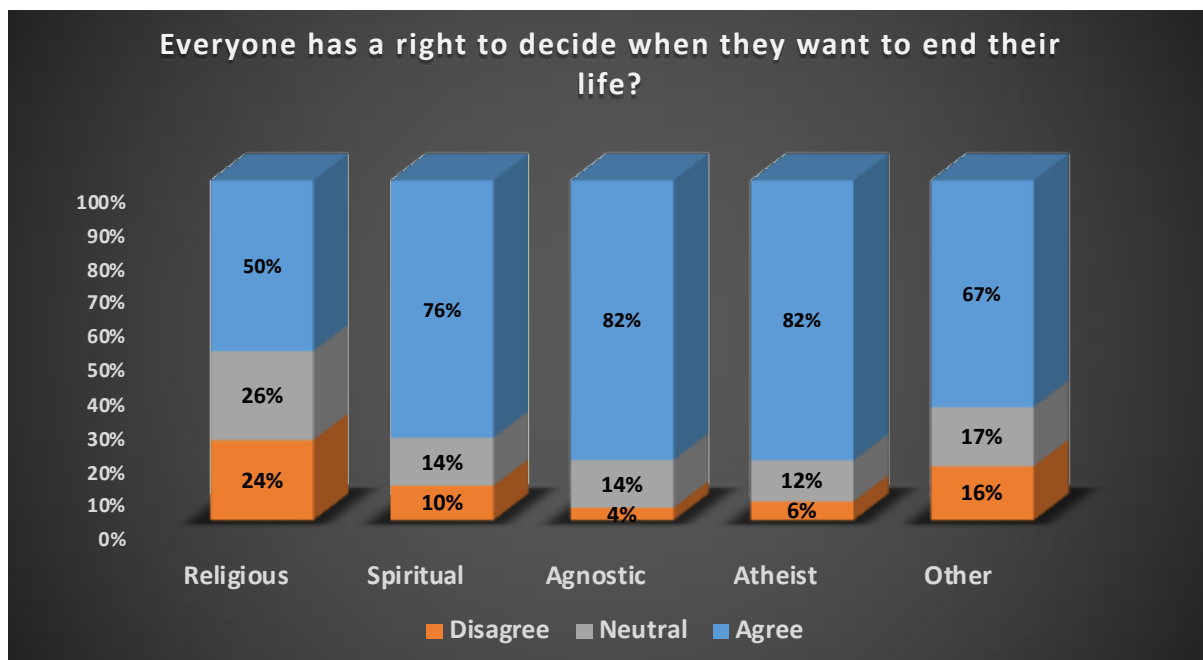
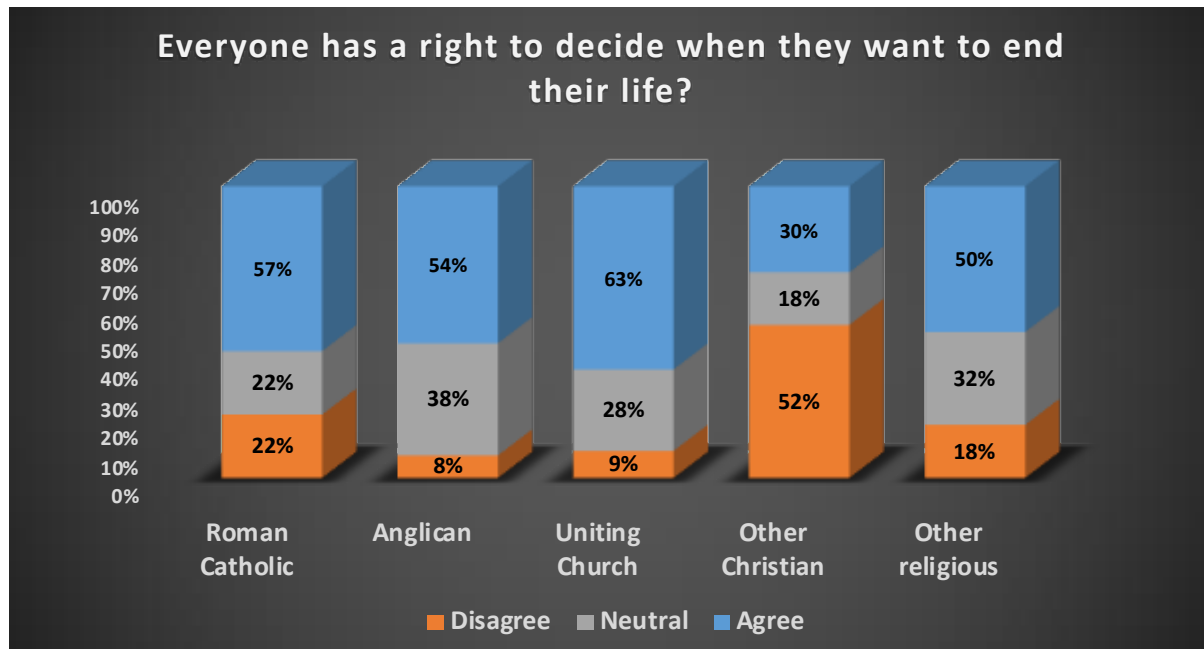


Figure 17 shows that within those who identify with an institutionalized religion, half to two-thirds of respondents support a person's right to end their life. By contrast, 52% of members of *other Christian* religions were opposed to the idea.

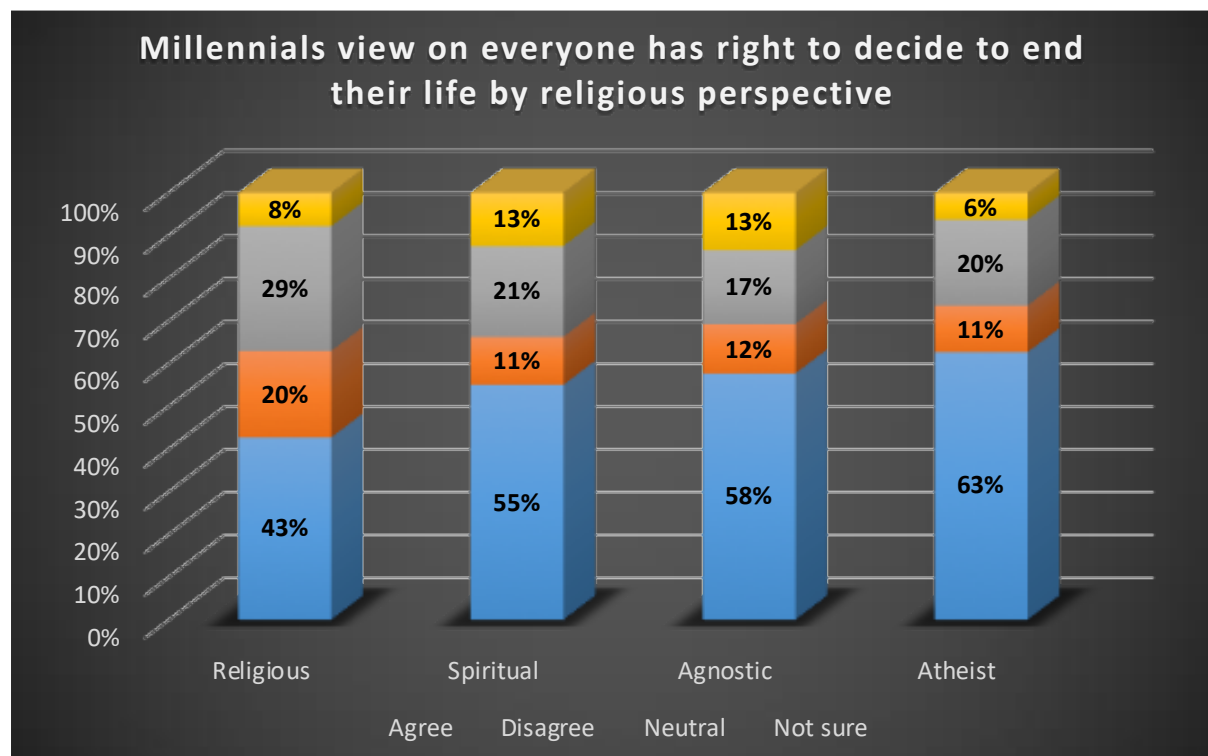
Figure 17: Does a person have the right to end their life (agree/disagree) by religious sub-grouping - Boomers



## Millennials - Does a person have the right to decide to end their life?

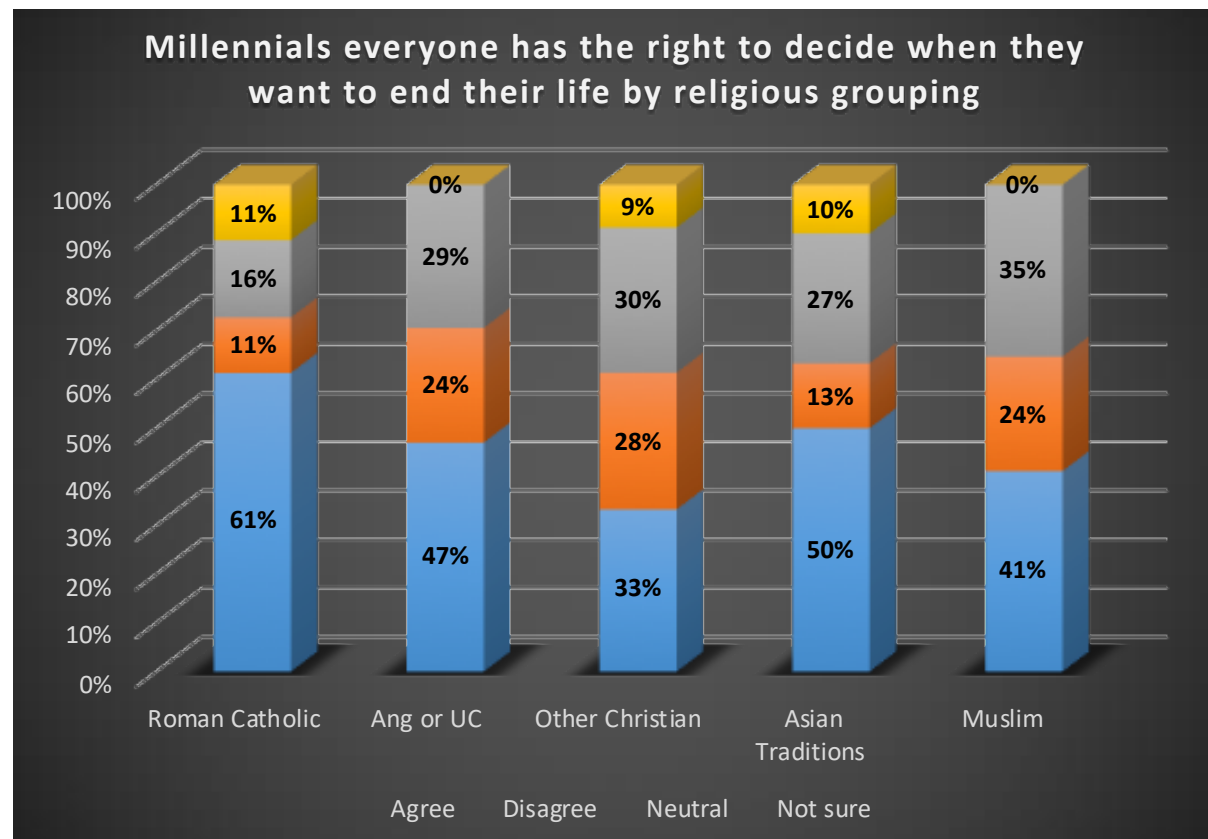
Among Millennials, Figure 18 shows that with the exception of people of a religious perspective, a half to two-thirds of respondents agreed with the contention that a person has the right to end their life. Neutrality and uncertainty again held a quarter to a third of responses.

Figure 18: Does a person have the right to end their life (agree/disagree) by religious perspective - Millennials



For Millennials, Figure 19 shows that a majority of Roman Catholics (61%) agreed with the contention that everyone has the right to decide they want to end their life. A majority (50%) of those from Asian traditions also agreed followed closely by those from Anglican, Uniting and Islamic faiths. By contrast, 28% of members of *other Christian* religions were opposed to the idea. Neutrality and uncertainty again hold a quarter to a third of responses.

Figure 19: Does a person have the right to end their life (agree/disagree) by religious sub-grouping - Millennials



## Will euthanasia desensitize people and devalue human life?

Table 12 reports data on the question as to whether or not the provision of euthanasia would result in desensitizing people, particularly with regards to the value of human life. Figure shows that just over half (56%) of Boomers and one third (36%) of Millennials disagreed with this contention. Once again a quarter to a third of respondents were wither neutral of unsure.

Table 12: Will euthanasia desensitize people and devalue human life?

Position	Boomers (%)	Millennials (%)
Agree	17	26
Disagree	56	36
Neutral	20	25
Don't know; Not sure	7	12

## Boomers - Will euthanasia desensitize people and devalue human life?

Figure 20 reports data on this question for Boomers by religious identification. A solid majority of Boomers in all groups, except for those who identified with an institutionalized religion, rejected the idea that access to euthanasia will desensitize people and devalue human life. However, only 36% of those who identified as religious actually agreed with the statement.

Figure 20: Euthanasia will desensitise people and devalue human life (agree/disagree) by religious affiliation - Boomers

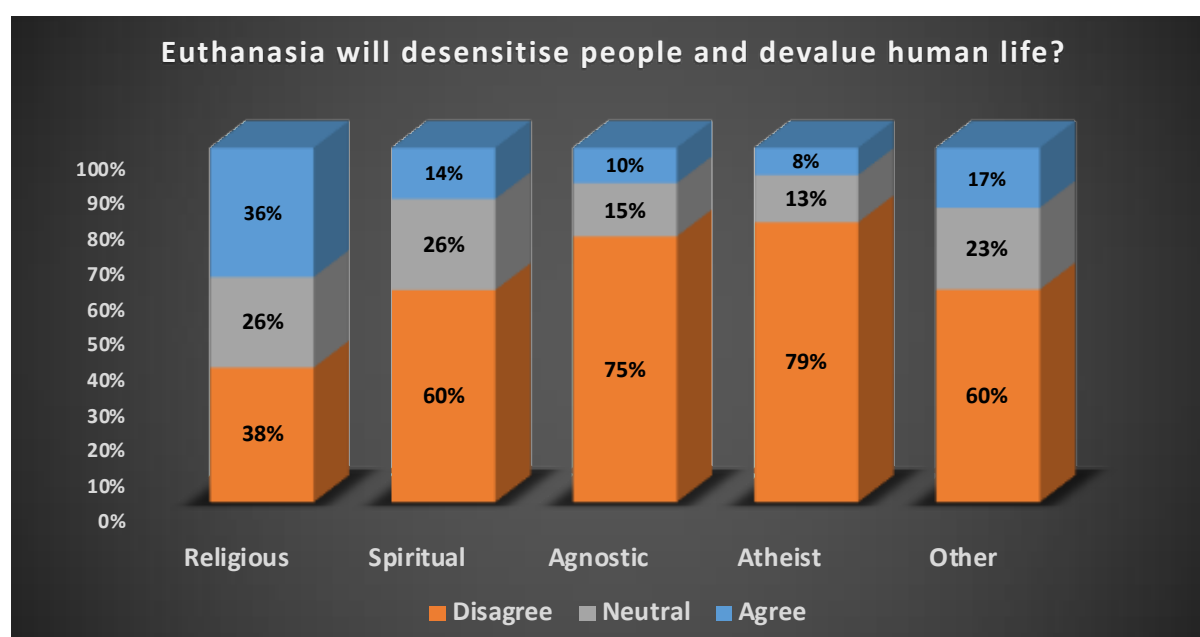
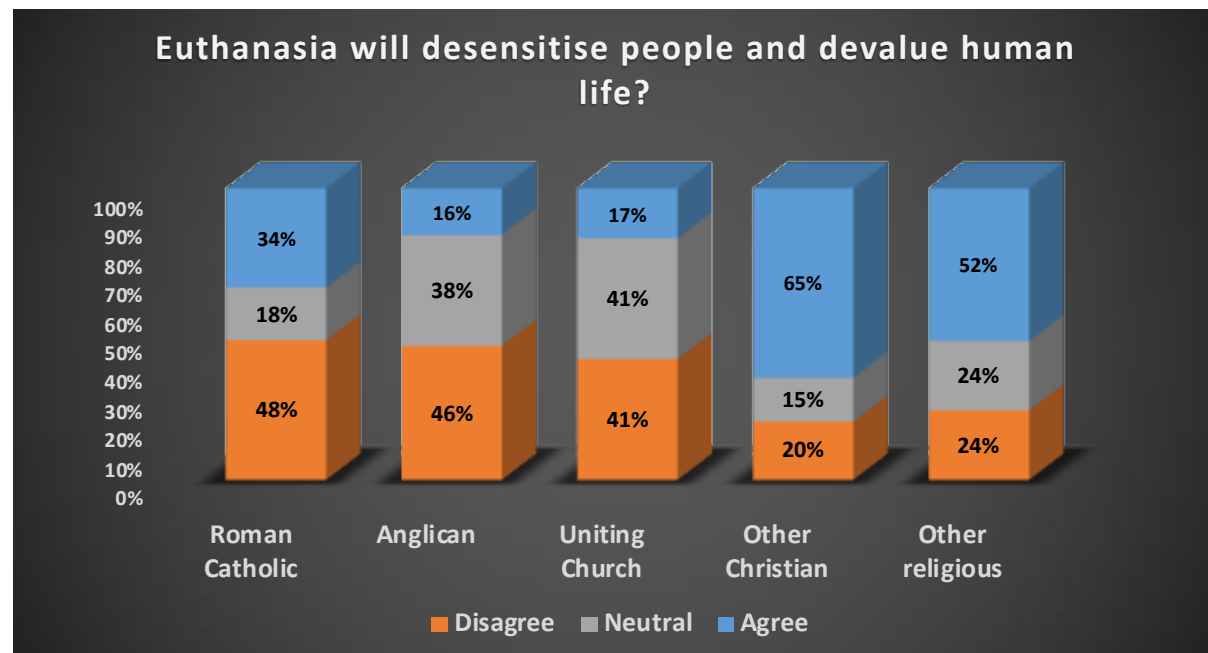


Figure 21 examines the question from the perspective of Boomers who identified as being religious. Majorities of Roman Catholics and Anglicans disagreed with the idea that access to euthanasia would desensitize people and devalue human life while 65% of those who identify with 'other Christian' religions agreed with the idea. Once again, large proportions of respondents opted to take a neutral stance on this use.

Figure 21: Euthanasia will desensitise people and devalue human life (agree/disagree) by religious sub-grouping - Boomers



## Millennials- Will euthanasia desensitize people and devalue human life?

For Millennials, Figure 22 reports data on the question as to whether or not access to euthanasia will desensitize people and devalue human life by religious identification. One third to a half of respondents in all groups, except for those who identify with an institutionalized religion, rejected the idea that access to euthanasia would desensitize people and devalue human life. However, 41% of those who identify as 'religious' agreed with the statement.

Figure 22: Euthanasia will desensitise people and devalue human life (agree/disagree) by religious affiliation - Millennials

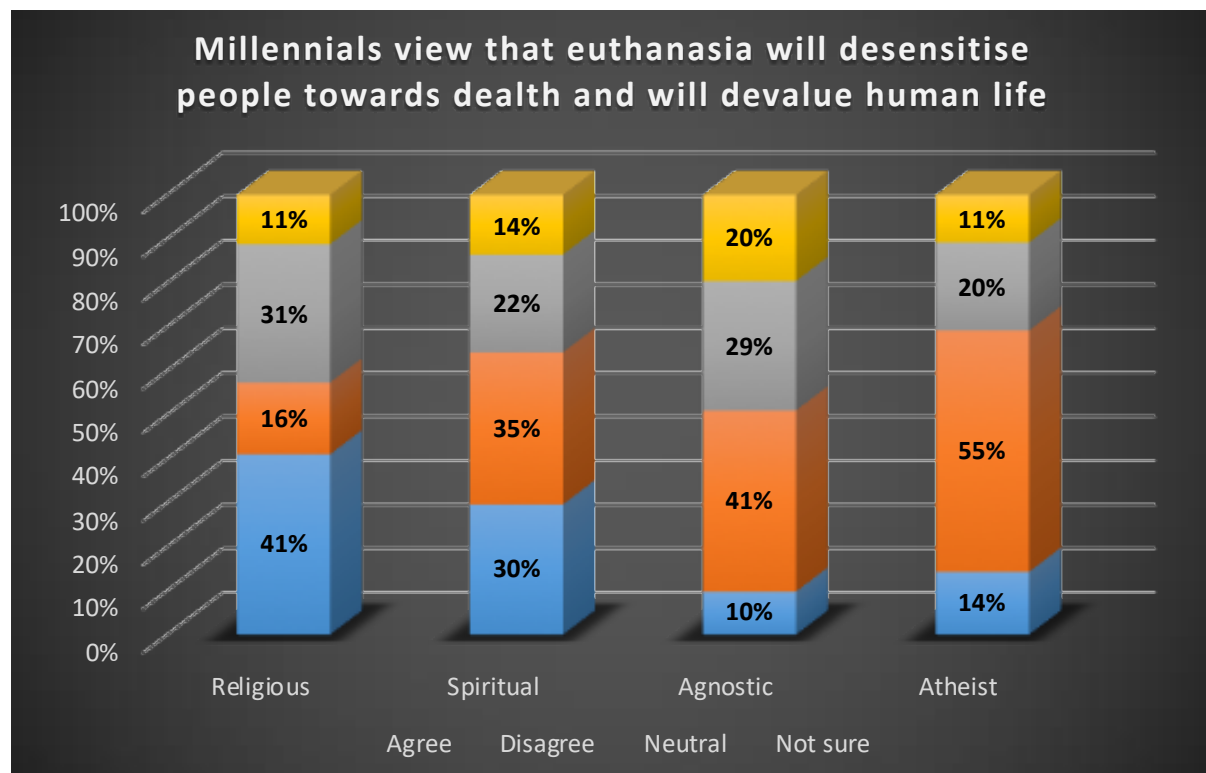
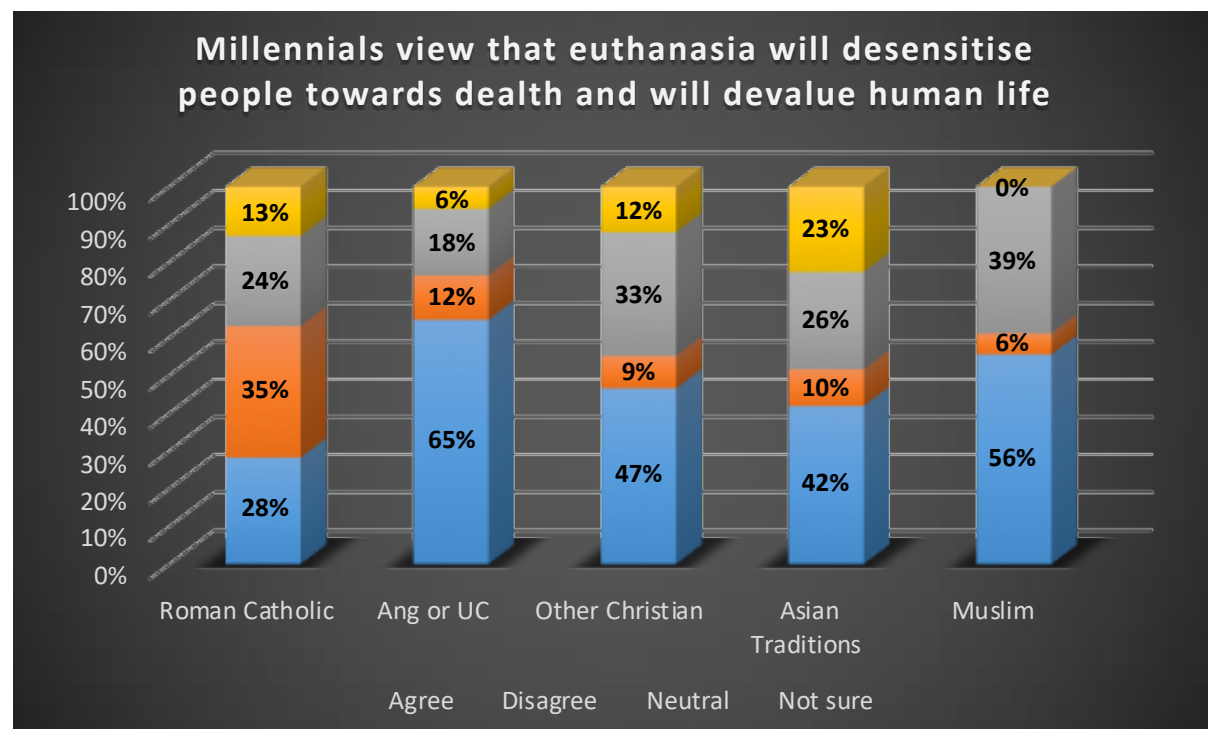




Figure 23 reports data on the question as to whether or not access to euthanasia will desensitize people and devalue human life by religious affiliation for Millennials. A majority (65%) of Anglican/Uniting Church respondents agreed that with the contention that access to euthanasia would desensitize people and devalue human life. Larger numbers of Muslim (56%) and other Christian traditions (47%) held a similar view. Once again, large proportions of respondents opted to take a neutral stance on this use.

Figure 23: Euthanasia will desensitise people and devalue human life (agree/disagree) by religious affiliation - Millennials



## Law and ethics

Table 13 reports data on respondents' views on whether they considered that laws would resolve the ethical issues surrounding euthanasia. A majority of Boomers (41%) agreed with the statement that drafting laws will not solve the ethical issues associated with euthanasia. Millennials showed less direct support for this proposal (31% agreed). However, the bulk of their response again was wither neutral (36%) or unsure (22%).

Table 13: Drafting laws will not solve ethical issues with euthanasia

Position	Boomers (%)	Millennials (%)
Agree	41	31
Disagree	19	11
Neutral	28	36
Don't know; Not sure	12	22

## Boomers - Law and ethics

Figure 24 shows that a majority of respondents, as examined by religious identification, except for those who identified as 'other', agreed with the statement that drafting laws will not solve the ethical issues associated with euthanasia.

Figure 24: Drafting laws will not solve ethical issues with euthanasia (agree/disagree) by religious affiliation - Boomers

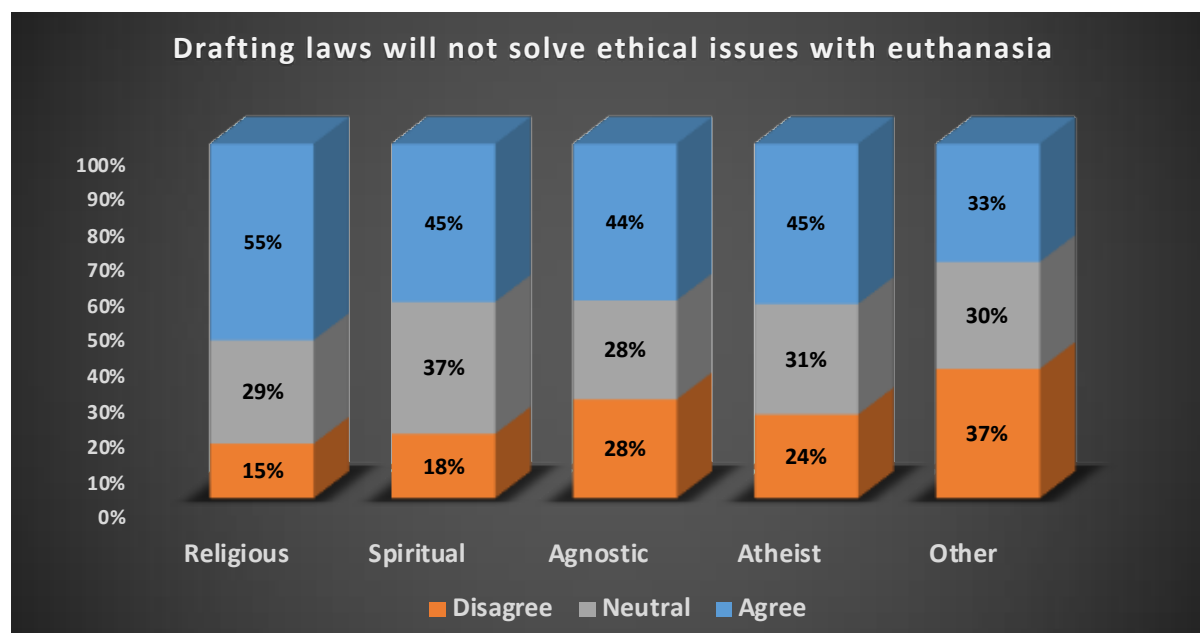
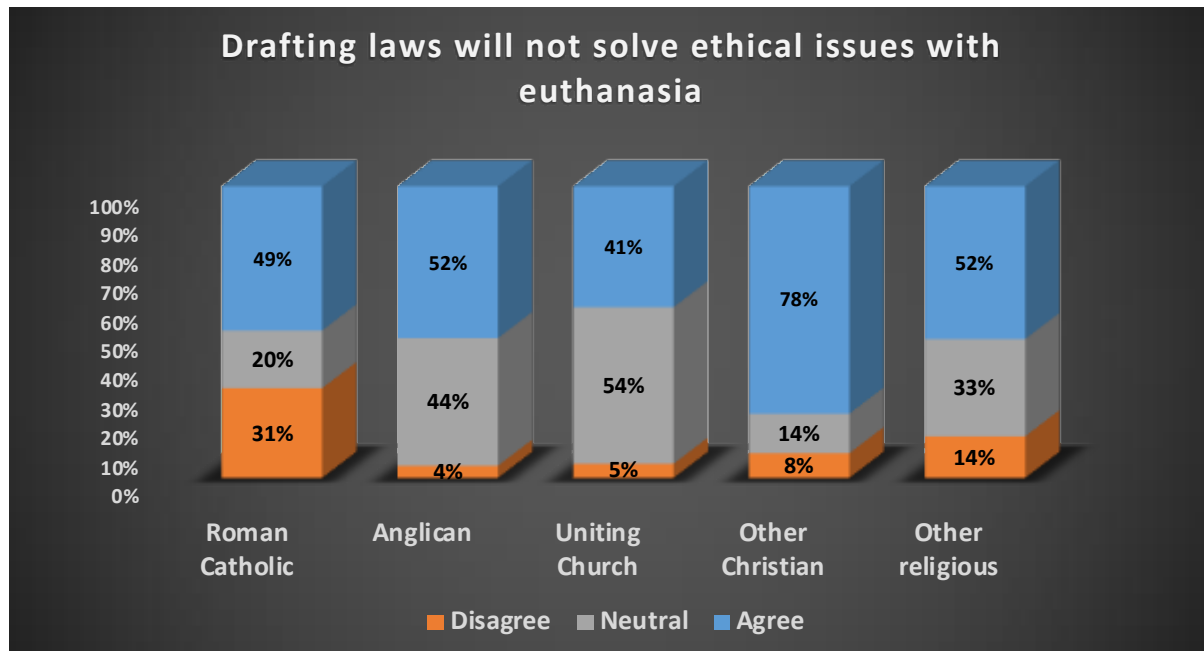


Figure 25 shows that within the grouping of those who identified as religious, a majority of respondents agreed with the statement that drafting laws will not solve the ethical issues associated with euthanasia. Once again, levels of uncertainty were very high amongst specific sub-groups e.g. Anglican and Uniting Church members.

Figure 25: Drafting laws will not solve ethical issues with euthanasia (agree/disagree) by religious sub-grouping - Boomers



## Millennials - Law and ethics

For Millennials, Figure 26 shows that a majority of these respondents, as examined by religious identification, were either uncertain or neutral with regards the extent to which drafting laws would solve the ethical issues associated with euthanasia.

Figure 26: Drafting laws will not solve ethical issues with euthanasia (agree/disagree) by religious affiliation - Millennials

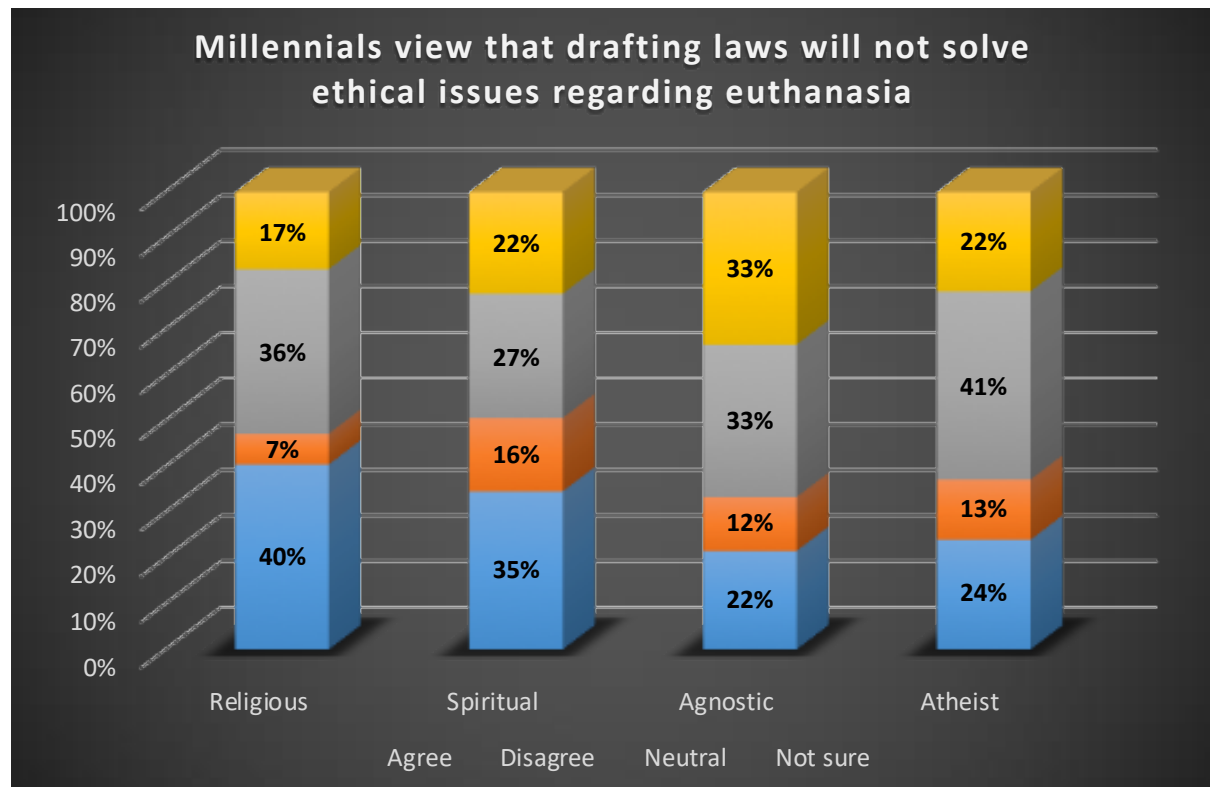
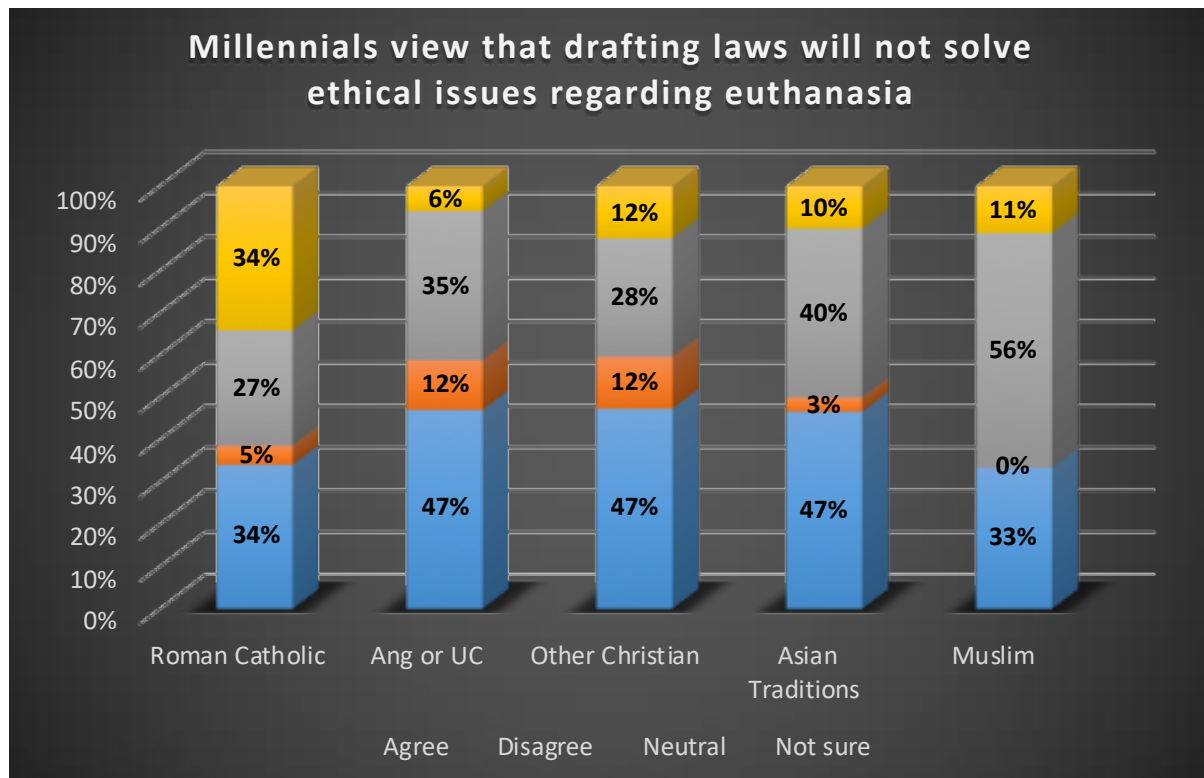


Figure 27 shows that within the grouping of Millennials who identified as religious, large minorities agreed with the statement that drafting laws will not solve the ethical issues associated with euthanasia. Once again, levels of uncertainty were very high amongst specific sub-groups e.g. Roman Catholics, Asian traditions and Muslims.

Figure 27: Drafting laws will not solve ethical issues with euthanasia (agree/disagree) by religious sub-grouping - Boomers



## Overview of findings – Part 1

Several key insights can be drawn from this initial reporting of the research findings. Specifically there was general support in the community for the legalization of euthanasia, albeit, a consistent but large minority people have taken a neutral stand on the issue or are uncertain about it. When the question of the legalization of euthanasia was worded more tightly, for example, where euthanasia was available as a solution for people with terminal or extreme physical illness, support for such legislation grew, with the movement in responses being away from uncertainty towards agreement. This shift also held for many people who held various religious affiliations. A similar shift in the data was evident when the question of euthanasia was addressed within the context of enabling a person to die with dignity.

It is important, therefore, to examine the responses that are centred on either neutrality or uncertainty, so as to be able to better understand the community's perspectives on this issue. Part 2 of this report takes up this question.

## Part 2: Addressing uncertainty – a cluster analysis

In Part 1 of this report we saw that many respondents expressed neutrality or uncertainty with regards many of the propositions put to them concerning the legalization of euthanasia. The actual questions put to respondents can be found in the Appendix to this report. There it can be seen that question were put to respondents on a five-point Likert scale (Strongly Disagree (1) to Strongly Agree (5)). On this a scale, a score of three was labelled neutral. Respondents could also reply 'don't know, uncertain or unsure', depending on the question offered. A simple approach to analyzing data such as these is to simply dichotomize the data into categories of agree or disagree, generally coding neutrals with those who did not agree with a given statement. However, in this study it is neither sensible nor safe to code the data in this way, because it is not known what respondents meant by their neutral response, any more than it can be known why it is that people are uncertain about a given issue. They neither agree nor disagree. And as such, a third group, and a large one at that, represent the views of those being undecided or not committed one way or the other.

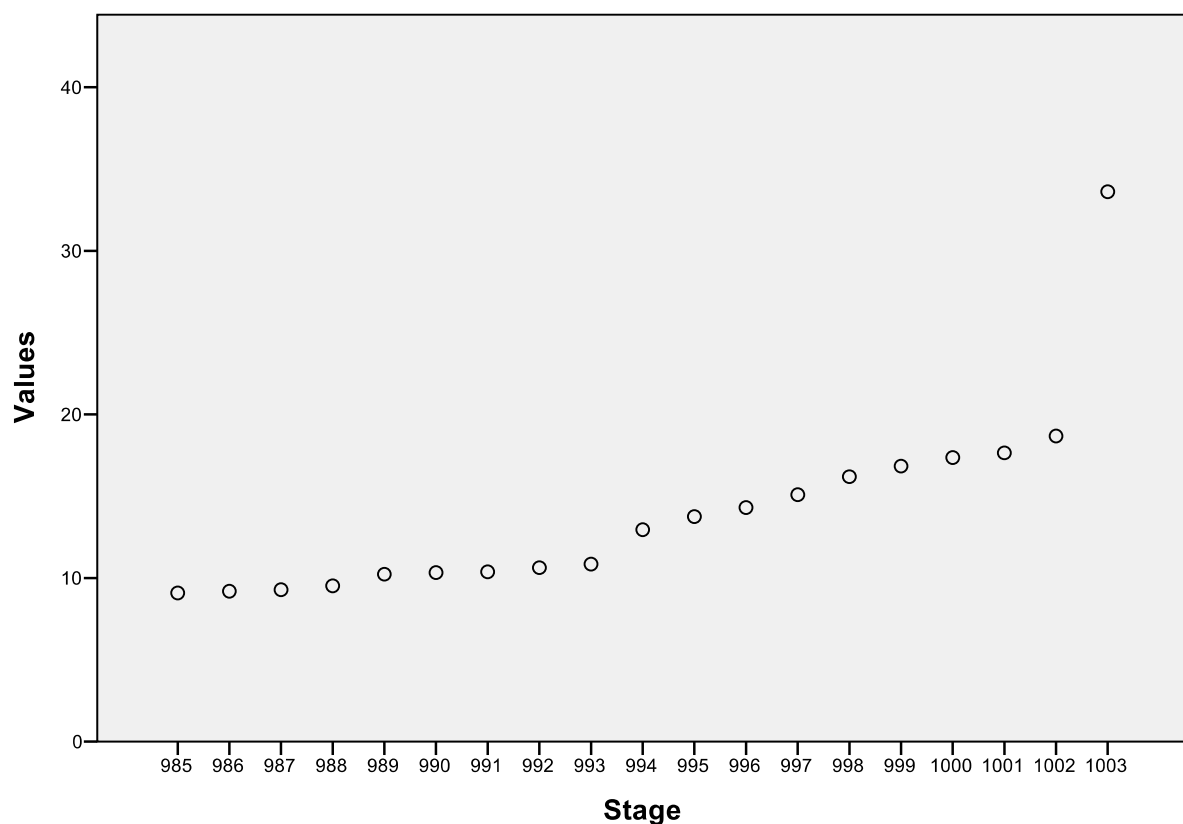
Greater clarity about where this third groups stands, overall on the issues raised in this study, can be obtained through the use of cluster analysis. Cluster analysis is an exploratory statistical procedure which links respondents together on the basis of the extent to which they are alike to each other, on variables of interest. So, with a view to gaining deeper insights into where respondents stand on the issues of interest in this study, participants responses to each item were recoded into three groups (Disagree, Neutral/uncertain and Agree) and the data were in turn subjected to cluster analysis, using the methods described earlier in this paper.

## Cluster analysis - Boomers

In keeping with the procedures for cluster analysis, the mass of the respondents' answers to the research questions, in terms of where respondents stand on the issues overall (combining like with like) is plotted and examined. The resulting Dot Plot enables the reader to visually examine the graph for apparent grouping. Within this Dot Plot (Figure 29) least three groups (sole grouping top right; a second grouping below and to the middle from the first and the remainder of the respondents) can be seen.

Figure 29: Cluster dot plot - Boomers

### Agglomeration Schedule Coefficients



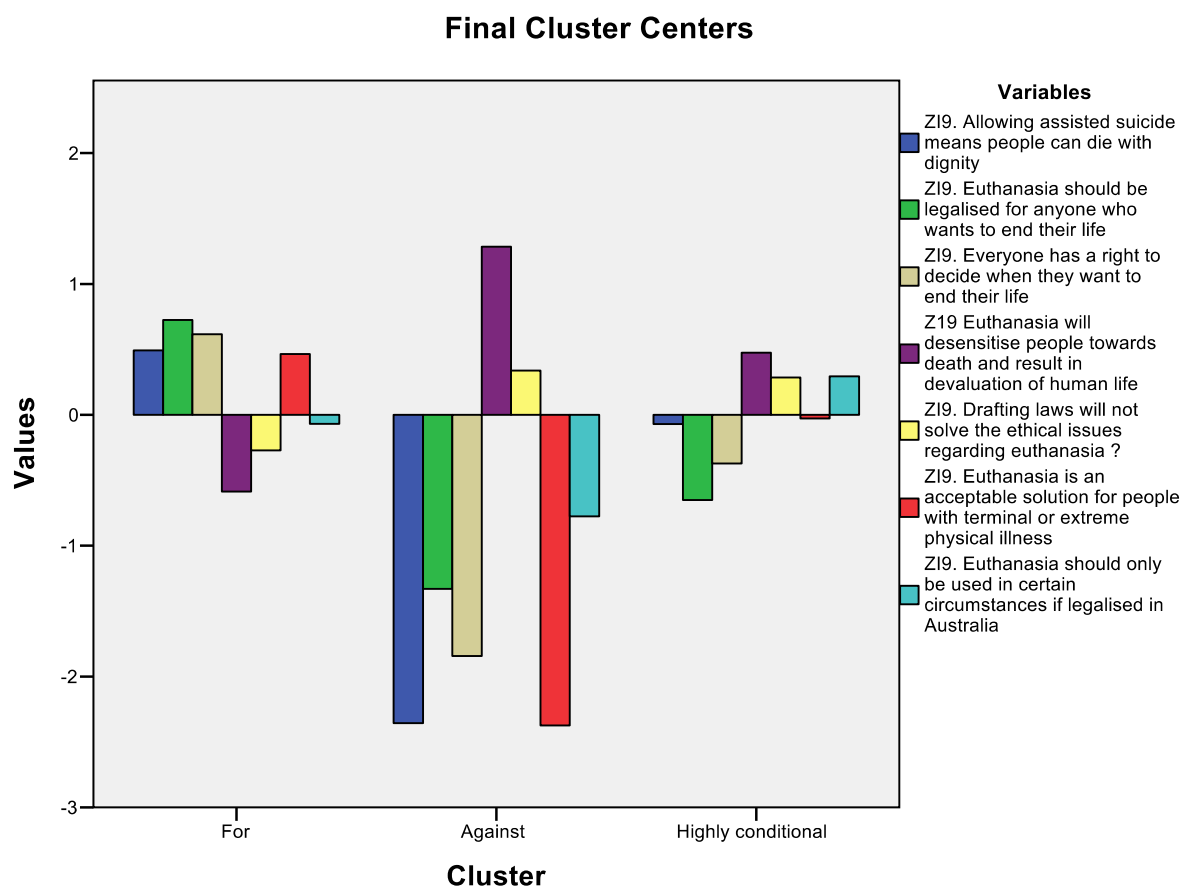
Based on the assumption that three distinct groupings may exist in the data, the K Means procedure is used. This procedure enables the graphing of where Boomers, collectively, may stand on these issues (Figure 30). Two items that closely informed this cluster solution were peoples' position on whether they saw access to euthanasia:

- As enabling people to die with dignity, and
- as a solution for people either terminal or extreme physical illness.

The three-group solution splits the data distinctly:

- Group 1 is labelled 'for' the legislation overall. This group reports above average support for the proposed legislation (recalling that a score of zero is an average response). Moreover, they do not think that euthanasia will desensitize people to the value of human life, nor do they see legislation as a tool for solving ethical aspects of the. It is the largest group representing 52% of respondents.
- Group 2 is labelled 'against' the legislation overall. This group reports above average opposition to the proposed legislation. The comparative length of the respective bars indicate that their views are strongly held, particularly when compared with all other respondents. It is the largest group representing just 10% of respondents.
- Group 3 is labelled 'highly conditional'. They support access to euthanasia only within certain circumstances. It follows that they are somewhat opposed to the idea that a person has the right to assisted dying in any circumstance while holding an average view on the issue of access to euthanasia as being an acceptable solution for people with terminal or extreme physical illness. It is the second largest group representing 38% of respondents.

Figure 30: Cluster groupings- Boomers





Further insight can be gained into peoples' perspectives by considering the demographic qualities of respondents by cluster group membership:

- Those supportive of the legislation:
  - Identified as agnostic or atheist, while proportions of Roman Catholics (43%) and Anglican (24%) responses meant that these groups approached statistical significance with regards their support on the issue
- Those whose support would be highly conditional
  - Were more likely to be men, who may identify as Religious and particularly Uniting Church members
- Those opposed to such legislation:
  - Were more likely to be women of a religious background who attend non-sandstone Christian churches.

## Cluster analysis - millennials

Figure 31 presents the Dot Plot for the Millennial analysis. Once again at least three distinct groups (sole grouping top right; a second grouping below and to the middle from the first and the remainder of the respondents) can be identified within the data. While finer distinctions could be drawn from the Dot Plot, three groupings are of interest to this study.

Figure 31: Cluster dot plot - millennials

### Agglomeration Schedule Coefficients

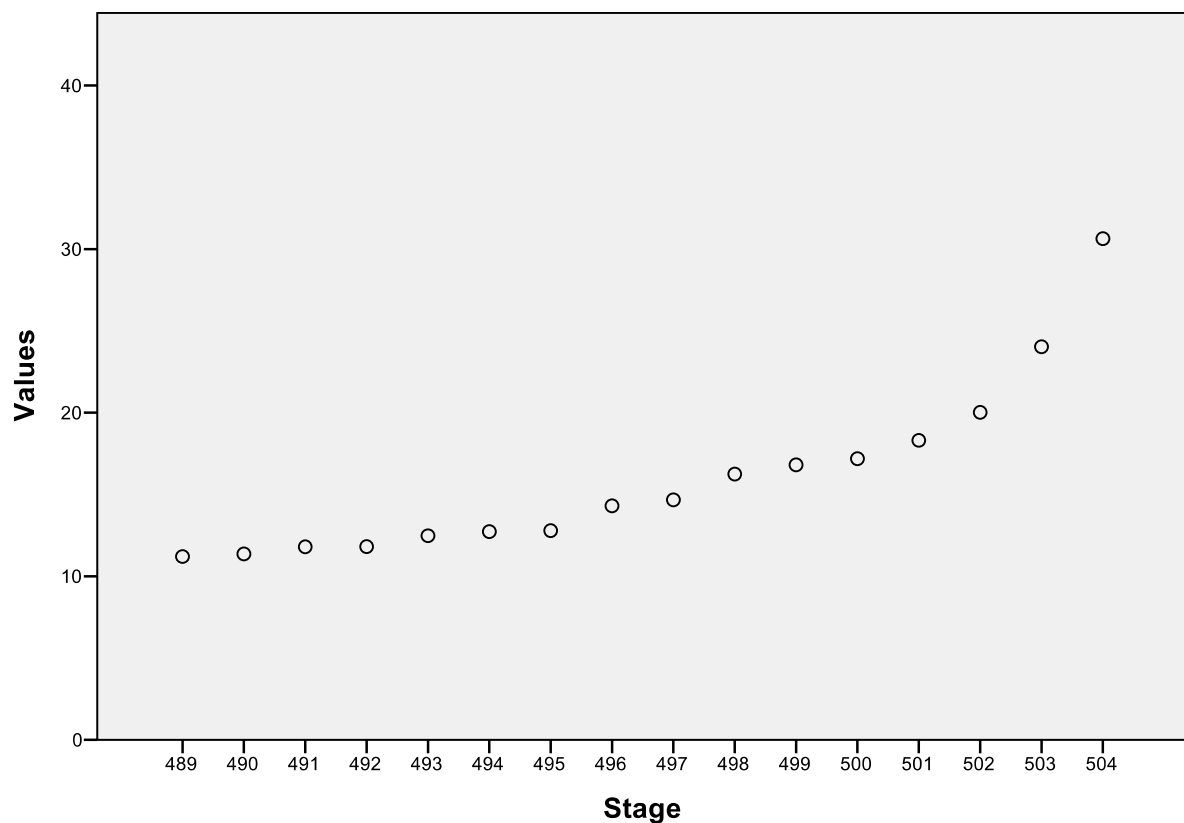
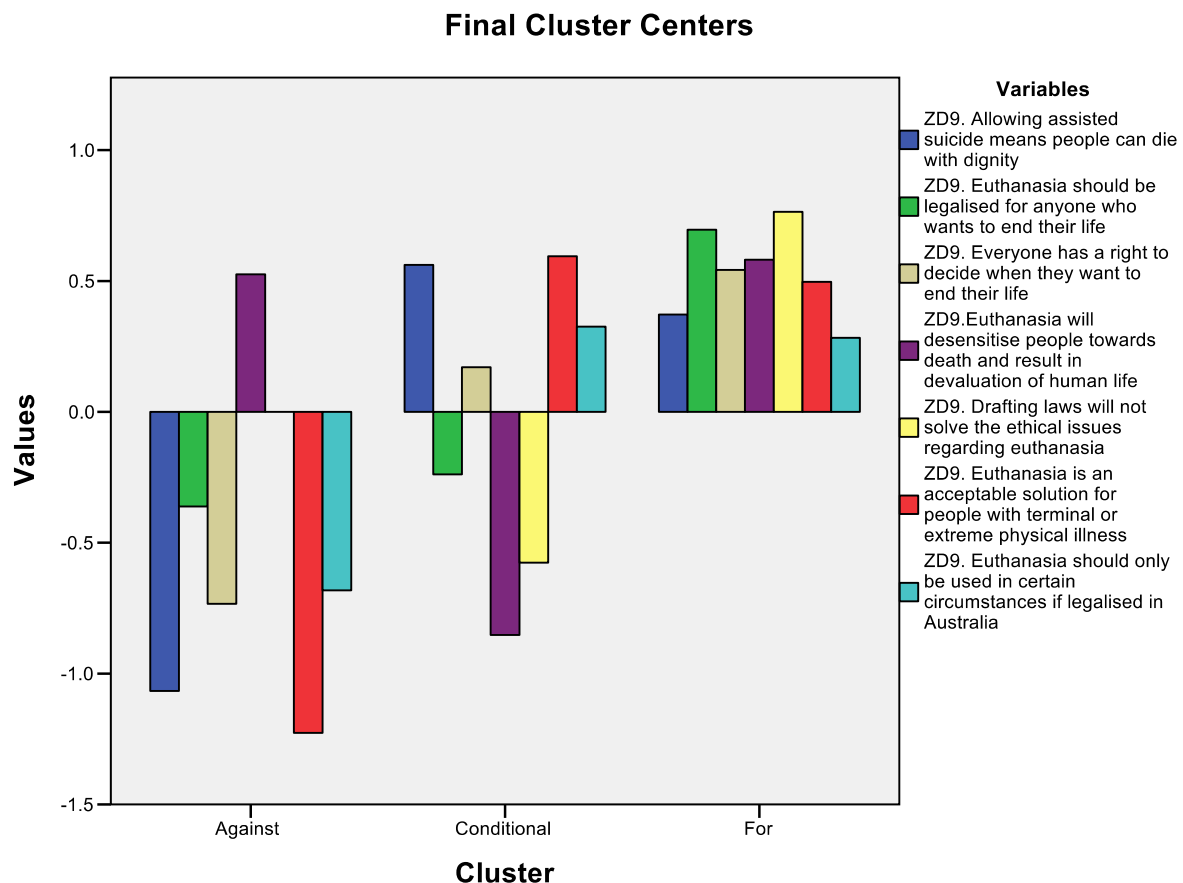


Figure 32 presents a graph of a three-group cluster solution that examines the issues from the Millennials perspective. The most significant item which underpinned this cluster solution was peoples' position on whether they saw access to euthanasia as a solution for people either terminal or extreme physical illness.

Figure 32: Cluster groupings - Millennials



The three-group solution splits the data distinctly:

- Group 1, on the left is labelled 'against' the legislation overall. This group reported above average opposition to the proposed legislation. The comparatively longer length of the respective bars indicates the strength of the views held by these group members. This group represents 31% of respondents.
- Group 2 is labelled 'conditional'. This group supported the notion that assisted suicide enables a person to die with dignity, that euthanasia is an acceptable solution for people with terminal or extreme physical and contend that access to euthanasia should only be legalized in specific cases, such as the latter point. Their views on the right to die were just above average. Consistent with their conditional view on euthanasia, the group was somewhat opposed to an overall right to euthanasia. They did not think that access to euthanasia would desensitize people towards the dignity of human life. Nor do they consider that legislation would

resolve any ethical contentions that surround the issue. This was the largest group representing 39% of respondents.

- Group 3 is labeled 'for' the legislation. They reported positive views on all issues surveyed. It was the smallest group representing 30% of respondents.

Further insight can be gained into peoples' perspectives by considering the demographic qualities of respondents by cluster group membership:

- Those supportive of the legislation were more likely to be:
  - Males and identified as spiritual or Buddhists. A proportion of Uniting Church members were trending in their support on the 'for' case.
- Those whose support would be conditional were more likely to be:
  - Females who were agnostic or atheist. Roman Catholics were trending towards significance as conditional supporters.
- Those opposed to such legislation were more likely to be:
  - Religious from non-sandstone Christian traditions with a portion of Uniting Church members trending towards significance on the 'against' case.

### Summary of cluster analysis results

The cluster analysis was conducted with the aim of gaining deeper insight into the conditionality that surrounds some respondents' views on access to euthanasia. In both analyses some 38% of Boomers and 39% of Millennials held conditional views with regards the legalization of euthanasia within varying contexts. The insight that can be drawn from these data is that uncertainty in the community around the issue of euthanasia may be addressed by ensuring that any proposed legislation be quite specific about the context in which such a procedure may be accessed. The results of the cluster analysis were consistent with earlier insights that proposed the offering of euthanasia as being an acceptable solution for people with terminal or extreme physical illness. Within this context conditional Millennials were clearly supportive. Boomers were clearly supportive of contextual the offering and were average in their response to the question of euthanasia as being an acceptable solution for people with terminal or extreme physical illness. If such contextual issues were addressed, the likely 'for' group would approach 90% for Boomers and 70% for Millennials.

## Summary and discussion of findings

This paper reports on nationally representative surveys concerned with peoples' views (50 years and over (Boomers) and 18–35 year olds (Millennials)) on the questions of euthanasia (in the context of terminal illness) and assisted dying. Given the ethical nature of current public debate concerning this policy issue, respondent perspectives by religious identification were also documented.

The study found that as a whole some two-thirds (65%) of Boomers and 58% of Millennials support the legalization of euthanasia. There was a high level of uncertainty in the community around this issue. The issue was in turn examined within the context of religious belief or religious affiliation. Approximately one third of respondents reported a formal religious affiliation. Of those with a religious affiliation, 48% of Boomers and 39% of Millennials supported the legalization of euthanasia. Again, for both groups, uncertainty remained an issue with some while a further 28% of Boomers and 40% of Millennials reporting uncertainty or neutrality on these issues. A strong majority of Roman Catholic, Anglican and Uniting Church members supported the legalization of euthanasia while members of smaller Christian denominations opposed the legalization of euthanasia.

Further analysis of the data found that peoples' positions of the legalization of euthanasia shifted with regards the context within which such a procedure may be offered. The more specific the context (e.g. euthanasia offered as a solution to people who have a terminal condition *or* extreme physical illness; enables a person to die with dignity) found greater support in the community. By contrast, the question as to whether or not a person had a right to die, in any circumstance, had less support. The results of the cluster analysis supported this conclusion.

Similarly, when the data are analyzed by religious affiliation, several insights were evident. While those with such an identification make up approximately one third of the community, people of belief did not report a unified position with regards access to euthanasia, when such an offering is contextualized (e.g. euthanasia offered as a solution to people who have a terminal condition *or* extreme physical illness; enables a person to die with dignity). When examined in this manner, opposition to contextualized euthanasia amongst those with a religious affiliation stood at about half of this group, or 15% of the population.

A number of limitations associated with this study should be noted. First, the data reported here reflect a snap-shot of community views on these issues at a given time. Second, while the sample sizes were sufficiently large so as to minimize sampling error, community views on these issues should continue to be monitored. Third, peer review of drafts of this paper pointed out that the word *voluntary* was not used to contextualize the definition of access to euthanasia. The inclusion of that word may have also reduced the levels of uncertainty evident in the community presently.

Based on these data, it is evident that there is strong community support for the legalization of euthanasia which provides a dignified, pain free death, where such a service is provided in the context of terminal, end stage disease. To this end, it may serve the community

interest to refer to the issue with regards the legalization of *voluntary end-stage of life, assisted dying*.

## Appendix 1: Survey questions relating to euthanasia

[ASK ALL]

18. What is your view on euthanasia?

	S/R	
It should be legalised	<input type="radio"/> <sub>1</sub>	
It should not be legalised	<input type="radio"/> <sub>2</sub>	
Uncertain	<input type="radio"/> <sub>3</sub>	

[ASK ALL]

19. Below are a few statements on euthanasia. How strongly do you agree or disagree with each of them?

	ROTATE	1 Strongly disagree	2 Disagree	3 Neutral	4 Agree	5 Strongly agree	DK/Not sure (99)
1	Allowing assisted suicide means people can die with dignity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2	Euthanasia should be legalised for anyone who wants to end their life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3	Everyone has a right to decide when they want to end their life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4	Euthanasia will desensitise people towards death and will result in devaluation of human life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5	Drafting laws will not solve the ethical issues regarding euthanasia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6	Euthanasia is an acceptable solution for people with terminal or extreme physical illness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7	Euthanasia should only be used in certain circumstances if legalised in Australia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>