



Serving life - until the end

**Statement of the Central Ethics Committee of the Johanniterorden
on assisted suicide**

- Guiding principles -

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In its ruling of February 26, 2020, the Federal Constitutional Court determined that the ban on the businesslike promotion of suicide is unconstitutional and declared Section 217 of the German Criminal Code (StGB), which was passed by the German Bundestag in 2015, null and void. The court states that the legislature may very well regulate assisted suicide, but not ban it completely. The Johanniterorden takes the following position on the question of how assisted suicide is to be judged from a Christian perspective and what consequences are to be drawn from the court's ruling for its own institutions:

1. The churches and the Diakonie¹ have the duty to stand up for and promote their biblically based view of life and death in a pluralistic society. The Johanniterorden with its works and institutions also sees it as its task to communicate its basic ethical values and convictions to patients, relatives and the public.
2. From a Christian perspective the dignity of the human being is based on his or her being in the image of God and on the understanding of life as a gift of God, which must be respected and protected from the first moment to the last breath. As the image of God, every human being is an image of divine love, regardless of his or her capacity for self-determination, his or her achievements, strengths and weaknesses, health, illness or disability. This is the foundation of the meaning of our existence in life as well as in death and a hope that reaches beyond death.
3. The Johanniterorden firmly rejects the proposal to form specially qualified interdisciplinary teams in diaconal institutions to provide assisted suicide. The Order also rejects the involvement of specially trained chaplains in professional assisted suicide as "extended chaplaincy practice" as an accompaniment for suicidal individuals and their loved ones.
4. The Johanniterorden does not offer assisted suicide on a regular basis, and ensures that such assistance is not provided by physicians, nurses, or any staff of the Order's facilities.
5. The Johanniterorden believes that assisted suicide is not part of the medical or nursing profession.
6. From a Christian perspective, no one is to be forced to live or to continue living, but they are to be encouraged to live. Therefore, preventive protection concepts are indispensable, and the facilities of the Johanniterorden will continue to be shelters for the weak and those who are tired of life.
7. Just as there may be suicide cases in which a moral, and even more a theological judgment should not be passed, the same may concern cases of assisted suicide. Under no circumstances, however, may it be concluded from this that the commitment to life and the decision in favor of death are, from a Christian point of view, options of equal rank.
8. Organized assisted suicide turns possible individual borderline cases into regular, institutionalized action. However, this cannot be reconciled with the ethical principles of the

¹ Diakonie is the social welfare organisation of Germany's Protestant churches

Johanniterorden. The Order finds with consternation that the legalization - and thus also the regulation - of organized assisted suicide has an impact on society's attitude to dying and death, which in turn has repercussions for individual cases in which a seriously ill patient and his or her relatives are faced with the pressing question of how they can bear the situation and what help there is for them in alleviating suffering.

9. The fundamental approach of both the Diakonie and the Order cannot be: "To fulfill dying wishes", but only: "To serve life - until the end". This includes the accompaniment in dying, but not the bringing about of death.
10. The tasks of diaconia and pastoral care, medicine and nursing, of course, also include perceiving the dying wishes of patients and residents and entering into a trusting discussion with those affected, instead of leaving them alone with their fears and thoughts. The employees need professional support for this. For this reason, facilities need instruments for structured, process-oriented ethical orientation and established organizational ethics, as well as training in dealing with clients' and patients' wishes for death.
11. The Johanniterorden sees it as its task to contribute to the improvement and expansion of palliative care throughout the country. Nursing homes of the Order should make more use of palliative services. Local hospice associations and regional outpatient palliative care should not be absent from any care facility. Existing draft laws regulating assisted suicide provide for mandatory counseling of those willing to commit suicide. A nationwide counseling system will incur considerable costs. The political demand of the Church and Diakonie must be that the state spend at least the same amount, if not more, additionally for the further expansion of hospices, palliative medicine, palliative care and suicide prevention.
12. The social task is to counteract the fears and loneliness of the seriously ill and dying and to develop a new culture of solidarity with the dying. What the dying need is our solidarity, not a killing medicament.

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For the Central Ethics Committee of the Johanniterorden
- The Chairman –

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