Bioethics in the news: The values at stake. Why are conservative values so difficult to communicate in the public square and progressive values so easy?

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Bioethics in the news: the values at stake. Why are conservative values so difficult to communicate in the public square and progressive values so easy?

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ABSTRACT
Bioethical issues are complex, often involve factual uncertainty, and have broad and long-term potential consequences for individuals, institutions and society. Simplification is a strategy used by so-called ‘progressive’ values advocates to promote acceptance of their values. It results from excluding consideration of complexity, uncertainty and potentiality in the values disputes around bioethical issues. In order to engage effectively in public debates of bioethics issues, it is necessary to understand the current societal values zeitgeist and how it differs from a traditional societal values zeitgeist. Since words are weapons in the values battles, it is necessary to identify how they are being used in the presentation of ethical issues in the media and ethical decision making and, when that use leads to unethical situations, offer alternatives. Moreover, bioethicists must also identify the causes of biased media coverage of ethics issues, including the phenomenon of ‘post-truth’, and work to eliminate them. In particular, Catholic communicators could play a leading role in defending ethical values which further the ‘common good’ in society, including by protecting vulnerable people. As an example, the current euthanasia debate is examined in some detail.

1. Challenging questions

When teaching bioethics to medical students, I often tell them that in searching for the ethics that should guide us, the questions we ask can be more important than the answers we give. Once a professor asked my view on the typology of the simplification process in public opinion that creates clichés and reduces the moral and ethical debate to categories in which it is very difficult to get a dialogue. Where should we go from there, he added, in order to get a real dialogue and to propose the ideas related to positive values.
He went on to say the current values battles, that those of us who espouse traditional or conservative values are losing, are important, but ‘they are just battles, and the war - not the battles - will be won.’ I applaud such optimism and hope that the professor is correct that the war will be won. One thing is certain: we must remain optimistic that it will be won because optimism helps us to be hopeful and avoid pessimism and if we lose hope we will definitely fail to win it. Indeed, a strategy of people advocating so-called ‘progressive’ values is to declare that there is no point in opposing their values because recognition and adoption of them by post-modern Western societies is inevitable.

People often say to me ‘Don’t you get tired of always losing when the arguments and positions you propose are rejected?’ My answer is that I do, but we can’t guarantee that we will win. We can, however, guarantee that we will try to help people to avoid unethical courses of action and to have accepted the values which we believe to be ethically right.

Winston Churchill said: ‘Success is not final, failure is not fatal: it is the courage to continue that counts.’ Courage is a crucial element – dare I say virtue, a very unfashionable, indeed, ‘politically incorrect’ word presently – in the values battles we are facing in the culture wars currently taking place. One needs to be prepared for flak and criticism, often quite nasty, from those who oppose more conservative or traditional views or values.

Perhaps, one of the cleverest verbal attacks I’ve received came from a person who suggested in a post on the Internet that my name should be spelt with only one ‘l’, that is, Somervile not Somerville. Others that I’ve received would amount to actionable defamation. And from time to time I’ve had bodyguards when I was giving a speech, including at an University convocation when I was being awarded an honorary degree. (Somerville 2013, 212–232)

That said, we must keep in mind that there are many more people who agree with conservative values than are willing to acknowledge that publicly – for instance, Catholics are the new group ‘in the closet’ on university campuses. Students fear hostile reactions from fellow students, and faculty fear loss of opportunities for appointment, promotion or tenure, placing their families at risk of bullying, especially if they have children, and loss of friendships.

I have been surprised and, to be honest, shocked by the silence I’ve encountered from people who whisper to me that they are, for example, against euthanasia, but wouldn’t say so publicly for fear of negative consequences. Consequently, important aspects of the task of Catholic communications professionals are to give people the words that they need to express what they believe with the least likelihood of eliciting a hostile response, and to engender in them the courage to speak.

Many people don’t know how to articulate what they believe. They often tell me after they hear one of my speeches or read an op-ed I’ve written, ‘I knew what I believed, but I didn’t know how to say it. Now I do.’

Another problem is that specialized information related to ethical issues (bioethics, euthanasia, and other related topics) is simplified in the public sphere by those with ‘progressive’ values. It’s necessary to explore the nature of this simplification process. Sometimes people with conservative values try to defend their ethical approaches
with too many details and data that seem peripheral and not existentially relevant for the audience. As well, there is a simplification-force that avoids going in-depth in the issues and sometimes is perceived as more reasonable and better than more comprehensive and nuanced analysis.

This ‘simplification process/simplification-force’ is a key element in the values battles in the media and public square and a primary reason why people with more traditional values are losing these battles.

Prime examples of this ‘simplification process/simplification-force’ in action are the same-sex marriage debate and the legalizing euthanasia debate.

In the same-sex marriage debate in Australia in 2017, for example, the pro side slogans included ‘Say Yes to Love’, ‘Say Yes to Equality’. None of us wants to say ‘No to love’ or ‘No to equality’, but that doesn’t mean that we agree that legalizing same-sex marriage is a good idea. The problem is we all say ‘yes’ to these goals described generally, but when we apply them to specific situations and ethically analyze those situations, we can’t always say yes from an ethical perspective.

The companion campaigns to ‘say yes to love’, are ‘say yes to family equality’ and ‘say yes to safe schools’. These slogans translate to, for example, ‘say yes to reproductive technologies’ to enable two women to ‘found a family’, yes to surrogate motherhood to enable two men to do the same, yes to the fatherless or motherless families which result, yes to the irrelevance of parent-child biological bonds, and in the case of ‘safe schools’, say yes to abolishing biological sex as a differential, yes to “gender fluidity” – which gender one wants to be is simply a matter of personal choice, not biology.

Let’s be clear: discrimination is wrong. But recognizing innate differences, for instance between men and women and that men and women are equal but not the same, is not discrimination. Neither is recognizing that children have a right to a mother and a father, if at all possible their own biological parents (Somerville 2011). As well, in the Australian same-sex marriage debate there was overwhelming use of the ‘rainbow flag symbolism’ with no competing images from the ‘no’ side. Pedestrian crossings, a huge Sydney landmark, the Coca Cola billboard, automatic bank teller machines, railway station concourses, street lighting poles, shops, restaurants, bars, hotels, hairdressers, were decorated with flags and bunting in rainbow colors the symbol of the LGBTQI+ community. Sometimes there were no words – for instance, just rainbow colored heart shapes stuck on a large railway concourse. The message was ‘join in the same-sex marriage party’, be joyful, have hope.

In short, the ‘yes campaign’ was strongly visual, emotional, personally-focused and relational.

A negative content companion strategy was the characterization of people who opposed same-sex marriage as discriminatory, bigoted, homophobic, stuck-in-the-past, and probably religious.

The ‘yes’ campaign was also medicalized and politicized. For instance, the Australian Medical Association took the position that a vote for same-sex marriage was needed to protect the mental health and well-being of LGBTQI+ Australians, especially those who were young. Companies openly supporting same-sex marriage
were praised and the executives of those refusing to do so were vilified and shunned.\textsuperscript{9} Calls on the public not to deal with the latter companies were common.

Similar slogan strategies were employed in the euthanasia debate in Canada. People were urged to ‘Say no to suffering, no to cruelty; say yes to respecting the dying person’s dignity, say yes to a “good death”, yes to kindness.’\textsuperscript{10} The same problem arises, we can all agree with those goals, but that doesn’t mean we can agree with euthanasia.

Again, like the same-sex marriage campaign the ‘pro-euthanasia campaign’ was strongly visual, emotional, personally-focused and relational, and those opposing it were characterized as stuck-in-the-past and probably religious. The campaign was also highly medicalized and politicized, with unflagging repeated efforts to have legislation authorizing the practice presented in federal parliament in Canada\textsuperscript{11} and, likewise, state parliaments in Australia.\textsuperscript{12}

A negative content companion strategy was the characterization of people who opposed euthanasia, as their wanting people to suffer and lacking kindness and compassion.

The countervailing anti-same-sex marriage and anti-legalizing euthanasia cases are much more complicated and difficult to make. They require, among other considerations, three interrelated approaches: First, recognizing the need to take into account the roles and influence of complexity, potentiality and uncertainty in these values debates. Second, looking beyond just what an individual wants to wider impacts, especially on the common good and on vulnerable people – in same-sex marriage they are children, in euthanasia people with disabilities and fragile elderly people. And third, looking beyond just the present to what we can learn from the past and predict for the future.

\section{Complexity, potentiality and uncertainty}

In the late 1990’s a journalist asked me what I thought would be the big ethical issues for the new millennium. Without thinking I blurted out: creating an ethics that can accommodate and take into account complexity, potentiality and uncertainty. At the time I had no idea what I meant in saying that, but since then I have tried to explore what these concepts might mean. I will use the context of euthanasia to examine them (For extensive analysis of the concepts see Somerville (2006a)).

\subsection*{a) Complexity}

The case against euthanasia is now complex to argue and difficult to make and we commit a fatal error if we fail to recognize that. There are short clear arguments on the pro-euthanasia side, complex ones on the anti-euthanasia one.

When most people were religious and most societies had a common religion, it used to be easy to make the case against euthanasia – for instance, the Fifth Commandment mandated ‘Thou shalt not kill’, God forbids it - and hard to make the case for it even at a secular level, because humans may have instincts and moral intuitions against killing each other.\textsuperscript{13}
Now, it is very easy to make the case for euthanasia on the grounds I have already pointed out: suffering is bad, failure to relieve it is cruel, relieving it is kind and euthanasia therefore implements kindness. The pro case is also made on the basis of respect for the right of individual liberty, ‘It’s my life and I have the right to decide’, that is, intense individualism and rights to autonomy and self-determination are to be given priority.

The pro-euthanasia case looks only at the individual who wants euthanasia and the consequences of legalization only in the present. This ‘presentism’ results in a double failure: that of people’s individual and collective human memory,¹⁴ that is, it blocks wisdom from the past; and a failure of people’s individual and collective human imaginations, which results in a failure to consider future consequences and wider issues such as the impact of legalizing euthanasia on the common good, its harm to societal values and risks to vulnerable people.¹⁵ In this latter regard, there is a failure to take into account not only complexity, but also potentiality, which is discussed shortly.

Pro-euthanasia advocates label opposition to euthanasia as religiously based. Their rhetoric is: ‘You don’t have to have euthanasia but you have no right to impose your religion on me. What I do with my life is nobody else’s business’.

In short, pro-euthanasia advocates have one simple line of argument and stick to that. This simplistic pro-euthanasia argument is not surprising: ‘The first casualty of activism is complexity’ and there is strong activism by ‘secularists’ focusing on the right to take control of death.

A companion saying is that ‘the first casualty of war is truth’. But the loss of complexity is more subtle and often harder to detect than the loss of truth, which we see in the rise of ‘post-truth’, which is also discussed shortly.

Not only is the case for euthanasia easy to make, simple and straightforward – that is not complex – but also, at the surface level, at least in theory, carrying out euthanasia itself is presented as being easy, simple and straightforward.

On an anecdotal level, one Dutch physician who told me he had carried out over 1200 cases of euthanasia explained it this way: ‘I’m an anesthetist; I just give the first half of a general anesthetic (to paralyze the patient with curare) and not the second half (resuscitation).’

But even a ‘good death’ is not easy, simple and straightforward, that is, not complex – or at least it shouldn’t be if we are relating fully to the dying person.

In stark contrast to the ease of making the case for euthanasia, it’s difficult to make the case against it not because it’s a weak case, but because it is much more broadly based, considers more than just an individual, looks to wider present and future harms and risks and to past knowledge, and so on. It does all this in order to take into account the potentiality that would be opened up by legalizing euthanasia.

**b) Potentiality**

Opponents of euthanasia believe that the prohibition on intentional killing is a line we must not cross, first, because intentional killing of a human being is inherently wrong and that maintaining respect for human life requires that we
do not intentionally kill. These arguments are rejected by pro-euthanasia advocates as being only religious, although all civilized societies espouse a foundational value of respect for life, that is, respect both for each individual life and for human life, in general.

But anti-euthanasia adherents also argue euthanasia is wrong because of its potential to open up slippery slopes. The ‘logical slippery slope’ describes the situations where euthanasia is allowed and the people who can access it and the conditions under which it can be accessed constantly expand. The ‘practical slippery slope’ recognizes that once euthanasia is legal, cases undertaken not in compliance with the law occur and are more likely. To avoid these ‘slippery slopes’, British moral philosopher Dame Mary Warnock, who does not oppose euthanasia, has some advice. As she has put it in another context, that of human embryo research, ‘you cannot successfully block a slippery slope except by a fixed and invariable obstacle’. In the case of euthanasia that rule is that we must not intentionally kill another human being.

The slippery slope argument is rejected by pro-euthanasia advocates despite strong evidence both of its existence and that it continues to grow (Cohen et al. 2018; Cook 2018; Somerville 2015, 143-146; Somerville 2017). Their feelings that euthanasia is a compassionate response override the facts of its use. We have transitioned, as Alasdair MacIntyre says, from the ‘Age of Reason’ to the ‘Age of Feeling’ as the basis for moral decision making, whereas, I suggest, we need to employ both reason and feeling (‘examined emotions’).

The anti-euthanasia stance also considers wider issues, including serious immediate and future harms and risks to individuals, especially vulnerable and fragile people, institutions, principally law and medicine, and society, primarily its shared values. The difficulty is finding effective ways to communicate these harms and risks, in particular, visually.

As I’ve mentioned already in relation to the same-sex marriage debate, visual images are playing an increasingly important role in shaping public opinion regarding social and public policy, and political decision-making involving values-based decisions. This is especially true in values debates in bioethics, including the euthanasia debate.

The case against euthanasia is much harder to present in a visually effective way than the pro-euthanasia case. Unlike the heart-wrenching claims of individual, suffering people requesting euthanasia, there are at present, few, if any visual images of its risks and harms at a more universal level or the risks and harms it will create in the future. There have been no visual images of the risks to vulnerable people or the risks of its abuse, although this may be changing, which is a double-edged sword because it means that abuse is occurring. And there are no visual images of its harm to important societal values: we cannot put a damaged society in a wheelchair and have it interviewed.

In short, legalizing euthanasia raises wide ranging and multitudinous major issues for the institutions of medicine and law, for practitioners of these two professions, and for all of us as families, communities and a society, which the pro-euthanasia advocates refuse to acknowledge.
Pro-euthanasia advocates deny the harmful potential consequences legalizing euthanasia opens up both in the present and future. They look only at the present and fail to consider present obligations to future generations and the risks and harms that legalizing euthanasia creates, including its normalization, that is, it becomes just another routine way to die.

Pro-euthanasia advocates also refuse to recognize any beneficial potential of the opportunities death provides to experience the essence of our humanness and to share that with others and to find meaning. In this respect, we can learn from the profound wisdom, humanity and humanness of Jean Vanier’s approach to disability through the L’Arche communities which he founded. He shows us the opportunities that disability provides to ‘become human’ (Somerville 2015, 196-199). We can have similar opportunities and experiences in the context of death.

Euthanasia annihilates the potential to grow in deeply human ways that dying people and those who love or are caring for them can experience. Euthanasia converts the mystery of death to the problem of death and offers a technological solution – a lethal injection – delivered at a pre-determined time. It overrides and fails to respect the natural. Euthanasia makes how, when and where we die certain, that is, it gives control which is what its advocates seek.

c) Uncertainty

And that leads to consideration of how to deal with uncertainty in decision making about ethics. People who are uncomfortable with mystery or even frightened of it are also unable to deal with uncertainty. They convert unavoidable uncertainty to a false certainty: they are certain but they are ethically wrong.

Euthanasia treats terminally ill human beings as things to be checked out of the supermarket of life. Here’s how one Australian politician, Jeff Kennett, expressed this view on a radio program: ‘When you are past your “use by” or “best before” date you should be checked out as quickly, efficiently and cheaply as possible.’

We are not products or things; we are someones not somethings. For those of us who believe we have a Creator and are made in the image and likeness of God, we can see ourselves as begotten not made.

On a more mundane level we can look to environmental ethics and law and its precautionary principle for a precedent for how we should deal with uncertainty in decision making about ethics in contexts such as legalizing euthanasia, where proponents argue there are not serious risks or consequential harms and opponents argue there are (Kriebel et al. 2001). Let’s assume, for the sake of discussion, that legalizing euthanasia is such a situation of uncertainty. (To be clear, I believe that its risks and harms are well established.) The precautionary principle provides that actions creating uncertain risks of harm to the environment must not be undertaken until one can be reasonably certain these risks will not occur or, if so, they will not be serious. Legalizing euthanasia does not fulfill either requirement: its risks and harms are clear and they are serious.

To conclude this section, complexity, potentiality and uncertainty are related in that complexity and potentiality both increase the level of uncertainty, and converting
uncertainty to a false certainty means that recognition of complexity and potentiality are eliminated as necessary or even valid considerations, as, to emphasize, we can see happening with the pro-euthanasia arguments in the public square.

Ignoring or denying complexity, potentiality and uncertainty in ethical decision making are also related to justifying breaches of rights to respect for freedom of conscience, belief and religion. The people denying these rights see their claims, for instance, that objecting physicians should be forced to refer for euthanasia or abortion, as unimpeachable – they are certain their values are the only acceptable ones and, therefore, they are entitled to impose them (Somerville 2015, 67-74).

So, in summary, Catholic communications professionals must be conscious of at least three dangers when working in the context of helping people, institutions and societies to find the ethics they need to guide them and inform their law on controversial issues such as euthanasia, reproductive technologies, abortion, genetic interventions, artificial intelligence, and so on. The dangers to be avoided are:

- false certainty; to avoid this, ethical decision making structures and reporting require building in an ethics of uncertainty.
- being simplistic; avoiding this requires building in also an ethics of complexity. And
- not considering the impact of decisions on future generations and obligations to them; to avoid this it’s necessary to build in an ethics of potentiality.

3. ‘Youthquake’: the 2018 societal values zeitgeist

Now let’s look at the context in which we are fighting the values battles in which we are engaged. What is the 2018 societal values zeitgeist in developed Western democracies?

There is no single cause for the current state of affairs that ‘progressive’ or liberal values are increasingly dominant. Rather, in multicultural, multiracial, multi-religious, secular Western democracies, there is a ‘perfect storm’ of many and diverse factors that is giving rise to a seismic change in the values that inform the culture.

Good facts are essential to good ethics, and good ethics to good law. So first let’s look at the facts of the societal values zeitgeist in which our communications take place.

The Oxford Dictionary’s Word of the Year 2017 was… youthquake. The noun, youthquake, is defined as ‘a significant cultural, political, or social change arising from the actions or influence of young people’.22

Western societies are youth obsessed and one manifestation of that is a loss of respect for conservative or traditional values as conveyed in the wisdom of the Elders and knowledge from human memory, that is, history.

Older people not only have cosmetic surgery to look physically younger, but also, I suggest, for the same reason of wanting to appear young, or perhaps even to feel young, they adopt the values fashionable – ‘on trend’ – with young people.

This means that if, whether as a communications professional or in my case a bio-ethicist, we want to influence which values are adopted, we have to speak in such a
way that young people will hear our message. That’s important not only in the present, but also for the future because they will be the values decision makers of the future.

Most young people are liberal values (‘progressive’ values) adherents and often advocates. This values position involves an express rejection of traditional or conservative values and the adoption of an informing principle – a mantra – of ‘control, choice, and change’, in particular at the level of the right of individuals to control, choose and change what happens to them personally.

The companion belief is that, to a very large extent, no one has the right to impose limits on a person’s exercise of ‘control, choice and change’. So ‘progressive’ values adherents support, for instance, the pro-choice position on abortion, euthanasia, same-sex marriage, transsexualism, gender identification, absolute rights of individuals to reproductive freedom (an approach, at an extreme, of ‘if you want to have yourself cloned that’s only your business’), and just on the horizon pro-choice on genetically designing one’s children or if a man wants a uterus transplant so he can experience pregnancy, no one has the right to deny him that.

Consistent with these views, as social psychologist Jonathan Haidt shows in his book, *The Righteous Mind* (Haidt 2012), adherents of ‘progressive’ values reject history as a source of knowledge and possibly a way to access wisdom, regarding it as restrictive. For the same reason, they likewise reject authority, and they do not employ any sense of the sacred.

For ‘progressives’ what is ethically right or wrong depends on the situation, especially the personal preferences of those involved, and the consequences of one’s decisions. They employ moral relativism – nothing is absolutely right or wrong, there are no absolute principles, givens or truths (Somerville 2006b, 24–25, 30, 48–50). And consequentialism/utilitarianism mandates, respectively, that good outcomes justify the means used to achieve them and that ethics is determined by the greatest good for the greatest number (Somerville 2015, 135, 181).

Given these facts it’s not difficult to see why ‘progressives’ reject religion, which is historically based, authoritative, necessarily acknowledges the sacred realm and searches for the Truth, which allows the identification of absolute rights and wrongs. ‘Progressive’ values adherents are also likely to demonize religion in general and emphasize the harm it does, while failing to recount the good.

In addition, although ‘progressive’ values adherents generally advocate for tolerance, that tolerance is demanded only for their own views, values and beliefs and not for opposing views, values and beliefs. The most egregious intolerance is a refusal to respect freedom of conscience, belief or religion.

In contrast, conservatives generally value tradition (‘human memory’ or history), promote respect for authority and have a sense of the sacred – that is, they are committed to the continued existence of some corporeal or incorporeal entities that must not be laid waste, but held in trust for future generations. Haidt’s research shows that conservatives, unlike liberals, seek and use a sense of sanctity and eschew degradation, which are stances that allow humans to bond to form mutually beneficial, large, cooperative societies.
Liberals must achieve this bonding in other ways and one of my contentions is that the media, which are largely ‘progressive’ values based, intentionally plays a role in strengthening such bonding among liberals and undermining it among conservatives through its selective reporting and non-reporting.

I have argued elsewhere that human beings need to experience a sense of the sacred, whether as a religious sacred for those who are religious or a ‘secular sacred’ for those who are not (Somerville 2015, 95–96; Somerville 2006b, 3–2, 26). The concept of the secular sacred is one designed to recognize that the sacred is not only a concept that applies in a religious or ritualized context, but also one that operates at a general societal – or secular – level. I proposed it as a concept that, among other outcomes, might help us to find some shared ethics, including in relation to what respect for human dignity requires. It is a concept we should be able to endorse whether or not we are religious, and, if we are religious, no matter which religion we follow.

For those puzzled about the substance of a secular sacred, environmentalism provides an example. The concept describes an experience and sense that an entity, whether corporeal or incorporeal, in this case our physical ecosystem, must be held on trust and not laid waste or destroyed, that is, it informs us both that we must value it and about how we must not treat it.

Another concept I propose we need is that of, what I call, our metaphysical ecosystem – the collection of shared values, attitudes, norms of behavior, the stories we tell each other and buy into to create the glue that binds us together as a society, and so on (Somerville 2015, xiv, 196–250). Just as we now realize that our physical ecosystem – our physical environment – can be irreversibly damaged by our conduct, unless we intentionally act to protect it, the same is true of our metaphysical ecosystem, which we must also hold on trust for future generations.

With respect to the values zeitgeist, Haidt’s analysis strongly indicates that ‘progressives’ favor individual autonomy to a much greater extent than conservatives and conservatives favor the common good to a much greater extent than ‘progressives’. Applied, for example, to the euthanasia debate, Haidt’s conclusions translate into a conflict between giving priority to respect for individual autonomy (the pro-euthanasia individualistic position) and giving priority to respect for human life generally and protecting vulnerable and fragile people (the anti-euthanasia ‘common good’ stance). Pro-euthanasia adherents give priority to the former, anti-euthanasia the latter.

Finally, in understanding the changes that are occurring in the social values zeitgeist the degree to which language and choice of words matter cannot be overemphasized. When we talk of ‘values battles’, we can think of communications professionals, especially journalists, as ‘word warriors’ and the media as their battleground.

The nature of the societal discourse has changed and how information is framed affects how it is received. Communications professionals are the framers of information and as such they have an unprecedented opportunity to help shape the world of the future and unprecedented responsibilities in doing so. They have opportunities to engage in ‘verbal acts’. A ‘verbal act’ is an act that is not just descriptive words, but words that change reality. Examples are legislation or court judgments.
And it’s not only communications professionals’ ‘verbal acts’ that will count, but also their ‘verbal omissions’.

I believe a complex alignment of factors means there is a rare window of opportunity and an exciting challenge for communications professionals as word warriors in the context of ethics.

When religion played a larger role in society and many people’s lives, ‘ethics conversation’ was gap filling, today it is revolutionizing how we view life. ‘Ethics talk’ or ‘ethics conversation’, whether at the individual, institutional or societal level, and whether in our families, places of worship for those who are religious, or in our public square, is the way in which we are searching for shared values, which is an important component of searching for meaning in life.

So what factors are affecting our ‘ethics conversations’ in the media? Many of these factors have already been identified, but I list them here as a useful summary. Let’s take reporting on euthanasia as an illustrative test case.

4. Factors affecting our ‘Ethics conversations’ in the media

i) Imbalance and bias in reporting

As already explained, the pro-euthanasia case is much easier to present in the media than the anti-euthanasia one and this is one reason for the imbalance in reporting. The case for euthanasia has been largely made through the media reports featuring suffering individuals who beg for euthanasia and to whom our hearts rightly go out; we can imagine ourselves in the same situation and wonder what we would request.

There is also bias, especially anti-religion bias: For instance, in a 2018 television segment, NEWSFEED Chanel 7 Sydney, the host and three commentators, who were all pro-euthanasia, argued that only ‘God botherers’ were anti-euthanasia. Note the derogatory name.

ii) Paucity of visual images

As also discussed previously, visual images are playing an increasingly important role in shaping public opinion and in decision-making, including values-based decision-making. The case against euthanasia is much harder to present visually in an effective way. That means that people’s beliefs and opinions have been arrived at without taking into account considerations that cannot be visually presented.

iii) Impact of social media and education on young persons’ values

Moreover, public debate on values issues such as euthanasia is often conducted through popular media, which is also where many people gain most of their information about the issues and form their beliefs and opinions accordingly. As well, there is evidence that people use the Internet to confirm what they already believe and that they avoid sites that would challenge those beliefs.

And only ‘progressive’ values are being taught in many schools (Danielson 2018). One anecdotal incident was described to me by a moral philosopher who was asked...
by a Catholic high school to judge poster presentations prepared by its students on a current social ethical issue of their choosing. Many students chose legalizing euthanasia as their topic. Not one of those students opposed its legalization, indeed, all were in favor.

**iv) Failure to consider wider issues, future consequences and the common good**

As explained previously, the strongest case for legalizing physician-assisted suicide and euthanasia is that it is justified by the relief of the suffering of individual competent adults who want and give informed consent to it.

But, in deciding as a society whether to legalize these interventions, we must look beyond individual cases to consider far wider issues, which include, for instance, the impact on suicide prevention of the normalization of suicide as an acceptable response to suffering; what it means for society and our shared values to move from caring for those unable to care for themselves to killing them, especially those who are weakest, most in need and most vulnerable; and what would be the impact on future societies – would we have left them a society in which no reasonable person would want to live?

**v) Concealing language**

Language is the primary tool of communications professionals and the use of concealing language and euphemisms in referring to euthanasia is another way the pro-euthanasia case is promoted in the media (Somerville 2015, 117–166)

Pro-euthanasia activists have developed language that conceals or softens the reality of what euthanasia involves – namely, intentionally inflicting death or, in even more blunt language, killing another human being or helping them to kill themselves. Pro-euthanasia advocates avoid these descriptions – they even avoid using the word ‘death’ – because they rightly draw attention to moral and ethical concerns about this practice.

Pro-euthanasia advocates and the vast majority of journalists often use the neutral terminology of ‘physician assisted dying’ to refer to euthanasia or assisted suicide, a practice I call ‘euphemizing euthanasia’. Journalists have adopted this terminology, which, when many people unthinkingly use it, has solidified its use in the public square. This usage plays on the valid presumption that almost all patients want and expect medical assistance when they are dying.

Choice of language is important and influential in the context of ethical debate. The terms we use can both reveal and condition our emotional and intuitive responses, which are essential components in ethical decision-making (Somerville 2006b, 40, 70–71, 165, 235).

Moral and ethical imperatives demand that we must react with compassion and care for people suffering from debilitating and life-threatening illnesses, but our reaction should be to kill the pain and suffering, not the person enduring the pain and suffering.
vi) Normalizing language

Words are also used to normalize euthanasia: for example, we can trace a historical shift from describing killing in the context of euthanasia as murder to ‘mercy killing’; to euthanasia and physician-assisted suicide; to physician-assisted death; to physician-assisted dying; to physician-assisted termination – PAT (it sounds as benign as patting one’s beloved cat or dog); to good end-of-life care; to euthanasia as just the final act of good palliative care; to euthanasia as kindness and avoiding cruelty; and to failure to provide euthanasia or assisted suicide, as the Supreme Court of Canada ruled, being a breach of the constitutional right to life.²⁴

vii) Medicalizing euthanasia

Medicalizing euthanasia also helps to conceal what euthanasia involves and makes it seem more ethically acceptable: we assume that physicians don’t act unethically. We need to take the ‘white coat’ off euthanasia. Euthanasia is not medical treatment and should not be carried out by physicians or in hospitals or hospices (Boudreau and Somerville 2013).

I was giving a speech at the Australian Medical Association National Conference in Canberra some years ago and stated forcefully that ‘We can’t have doctors killing their patients!’ Dr Roger Hunt,²⁵ a palliative care physician who supports legalizing euthanasia, rose to his feet and proclaimed, ‘Margo will you please stop using the word “killing.”’ I asked him, ‘If it’s not killing what is it?’ He replied, ‘It’s VAE’ – voluntary active euthanasia, the acronym reduces the force of the words even more. Later in the speech I proposed that if euthanasia were to be legalized, it should be kept out of medicine and a special group trained to provide it – my suggestion was lawyers, as they knew how to interpret and strictly apply the law. Dr Hunt immediately rose to his feet again and shouted, ‘Are you crazy Margo? You’d have lawyers killing people!’ When it was doctors it wasn’t killing; when it was lawyers the same act was killing.

viii) Labeling opponents as religious

As mentioned previously, another pro-euthanasia strategy used in the media is to label opposition to ‘progressive’ values stances as being just an expression of religious belief: it’s a ‘label as religious and dismiss’ strategy.

To offer my personal experience as an example, although I never argue from a religious base I am often labeled as religious in an attempt to dismiss me and my arguments, one opponent having publicly described me as ‘a secret agent of the Vatican’. That characterization was justified simply on the grounds that my arguments against euthanasia coincided with Catholic moral and ethical positions on the topic.

Likewise, on a nationally broadcast ABC television program Q&A discussing, inter alia, legalizing euthanasia, the host asked me what religion I was, although he did not ask this question of any of the other four panelists.
5. ‘Post-Truth’: feelings trump facts

To yet another OED Word of the Year: ‘The Oxford Dictionary’s Word of the Year 2016 was post-truth – an adjective defined as “relating to or denoting circumstances in which objective facts are less influential in shaping public opinion than appeals to emotion and personal belief” (D’Olimpio 2017).

‘Ethics in a Post-Truth World’ (Gregory 2017) is an article discussing the ethics of communications professionals. It explains: ‘There are now “alternative facts”, we live in a post-truth age, politicians and other leaders tell lies which both they and the people they are speaking to know are not true.’ Alternative facts are factually incorrect information that supports the case the person using these ‘facts’ advocates and wants recognized.

The most important and prominent example of this situation in the context of euthanasia, is pro-euthanasia activists’ denial that legalizing euthanasia opens up ‘slippery slopes’. As mentioned previously, the evidence of such slopes is strong and irrefutable but these advocates deny that they exist and have convinced some courts that they are correct and, therefore, legalizing euthanasia does not open up such risks and harms.

And very recently, the term ‘post-truth ethics’ appeared. What could it mean? It sounds like an oxymoron, a contradiction in terms. ‘Post’: we know what we were, we know we are not that any longer, but we don’t yet know what we are or will become.

That’s a serious state of affairs if it’s true of the ‘ethical tone’ of our society or if it means that we used to know what was ethical or unethical, we recognize that we are confused in that regard now, and we don’t yet know what we will view as ethical or unethical in the future or how we will decide that.

And if in the term ‘post-truth ethics’, ‘post-truth’ means dishonesty, deception and lies, it conflicts with the word it qualifies, that is ‘ethics’, which connotes honesty, authenticity, and integrity (Somerville 2018).

Could ‘post-truth ethics’ be an expression of moral relativism, which rejects an approach that there is a Truth (with a capital ‘T’) which we can find through reason? Might it reflect the moral relativism approach that there are no absolute principles, that is Truths, which can be used to determine what is ethical or unethical, rather in every case it all depends on the situation?

And might the increasingly common ‘trial by media’ be another fallout of ‘post-truth’ in that the presumption of innocence is abandoned and the need for a judicial hearing and due process – ‘natural justice’ – to ensure as far as possible that the truth is revealed, is preempted.

6. Fighting the negative and promoting the positive: the role of Catholic communicators

So what should Catholic communications professionals do to fight harmful societal values and promote ones that are beneficial for both individuals and the common good of society? It merits noting that it’s hoped that the following proposals will be useful, not only, to Catholics, but also, to people seeking to uphold conservative or
traditional ethical values based on natural law principles, as fundamental societal foundations.

Again taking the euthanasia debate as an example, I will list here just some suggestions all of which need fleshing out:

i. Take practical steps and raise important questions. For instance, make sure people understand what carrying out assisted suicide and euthanasia involves in practice. And, very importantly, that they understand which medical interventions are not euthanasia or assisted suicide, for example, justified removal of life support treatment or the provision of fully adequate pain management. Members of the general public and even some, possibly many, healthcare professionals believe the latter are euthanasia and therefore tell pollsters that they support euthanasia being legalized.

ii. Refuse to be silenced or coerced – in other words do not self-censor - and help others to likewise refuse, at the same time setting an example of ‘values conversations’ that are open, free and respectful.

iii. Do not rely on religion or quote scripture to promote traditional values, for example, to oppose euthanasia – there’s no point in preaching to the choir.

iv. Present examples to which most people can personally relate, for instance, the combination of, on the one hand, the financial and psychological abuse of elderly persons (‘early inheritance syndrome’ where elderly people are defrauded of their financial assets most often by a close relative such as an adult child) and, on the other, legalized euthanasia will result in a lethal cocktail that could be called ‘early death syndrome’.

v. Consider the impact of euthanasia on vulnerable people such as people with disabilities – it delivers and instantiates a message of their having a life not worth living.

vi. Prominently report the voices and stories of people with disabilities, especially reports of their abuse in jurisdictions with legalized euthanasia or physician-assisted suicide.

vii. Question the impact of euthanasia on society’s shared foundational values, especially respect for life and that we are a caring society. Ask what it will do to our moral ecosystem.

viii. Ask, ‘Will euthanasia be used to save healthcare costs?’ (Trachtenberg and Manns 2017).

ix. Ask yourselves and others, ‘Do you want to be cared for by a doctor who is willing to kill you?’

x. Ask people how do you not want your great-great-grandchildren to die?

xi. Ask them what kind of society will they have left to those great-great-grandchildren? Will it be one in which no reasonable person would want to live?

xii. Present positive alternatives to euthanasia: Inform yourselves and your audiences of new research and keep up-to-date. For instance, Dr Harvey Max Chochinov, a Canadian psychiatrist who specializes in caring for terminally ill and dying patients has developed a psychotherapeutic intervention called ‘dignity therapy’ to help remedy people’s sense of a serious loss of dignity. It’s
a response to a research finding that in 57 per cent of cases in which Dutch physicians had undertaken euthanasia the reason given was the patient’s ‘loss of dignity’, whereas in only 5 per cent of cases was the reason pain (Chochinov 2013, 5).

xiii. Research has shown that hopelessness, which is distinguished from depression, was strongly associated with requests for euthanasia (Chochinov 2013, 18-19). So promote hope. Hope is the oxygen of the human spirit. It is to the human spirit as breathing is to the human body. Without hope a person’s spirit dies, with it they can overcome even seemingly insurmountable obstacles (Somerville 2000, xiv; Somerville 2006b, 234-240).

xiv. Recognize the strategies being used to promote euthanasia. One strategy of pro-euthanasia advocates is to make those who oppose euthanasia lose hope that their case could ever prevail and as a result give up arguing for their cause. That must not be allowed to happen and communications professionals have a very important role to play in ensuring that it doesn’t.

xv. Help to make dying bearable and combat loneliness. Dying alone seems to be a universal human fear. Dying and death have been depersonalized, dehumanized, medicalized, technologized, professionalized, institutionalized and certainly de-spiritualised. For the dying person this can result in what psychoanalyst and Yale law professor the late Dr Jay Katz called ‘intense pre-mortem loneliness’ (Katz 1986, 207ff) to which asking for euthanasia can be a response. Everyone has a role to play, especially communications professionals, in being voices in establishing approaches that will help to avoid or remedy this loneliness.

xvi. The ‘label as religious and dismiss’ strategy, mentioned already, is often used to exclude people and arguments supporting conservative values from the public square. The assumption underlying this strategy and purportedly justifying it includes that people who have religious beliefs are puppets of their Church, that is, unthinking, uncritical automatons. The claims made for exclusion of religious views also imply that such views have no rationally justifiable basis and that faith-based views are not open to rational interrogation. It also ignores the fact that everyone has a belief system whether that is religious or secular (Somerville 2015, 33-45).

The strategy of dismissing an argument on the basis of its coincidence with religious belief, overlooks the role that a belief system plays in many people’s decision-making in relation to many issues, especially ones involving values choices; for example, secularism and atheism are belief systems, yet the views of their adherents in the debate on same-sex marriage or other contentious issues are not automatically dismissed for being such. Nor should they be, because in a democratic society everyone has a right to a voice in the public square. To silence people because they are religious is anti-democratic and discriminatory, just as silencing atheists and secularists would be.
But it is not sufficient for communications professionals to fight the negatives, they also must provide positives. I believe that people with conservative values can win the values battles and culture wars if they can bring people, especially young people, access to experiences of amazement, wonder and awe and help them to find hope.

A personal story:

I was invited to present at the TED2018 conference the theme of which was ‘The Age of Amazement’, but was then disinvited on the grounds, among others, that my talk was ‘too mystical’ and that I had ‘very radical ideas’, which scientists would not like. In short, conservative values are the new radical.

It is important to recognize this is how traditional values are perceived if we are to understand what is happening in our supposedly democratic public square and in our interactions with young people, especially in my role as an academic with my students, if we are to successfully communicate our values to them. They have been carefully raised on a diet consisting almost exclusively of ‘progressive’ values (Danielson 2018, 1-24).

In my draft TED speech, I proposed an algorithm for the role of amazement, wonder and awe in our lives and societies:

\[ \text{AWA} - C = H + E \]

which translates as ‘amazement, wonder and awe’ minus ‘cynicism’ equals ‘hope and ethics’.

I believe experiencing amazement, wonder and awe can enrich our lives, help us to find meaning and change how we see the world. It can change the decisions we make, especially regarding values and ethics and how we live our lives (Somerville 2015 193–196). Amazement, wonder and awe are three entry doors into an experience of transcendence, the feeling that we belong to something larger than ourselves and that what we do matters more than just to us.

Young people are searching for that experience. They are searching for meaning. Amazement, wonder and awe can precipitate and contribute to the search for meaning. We should keep in mind that it might be easier to experience transcendence and find meaning in the company of others so part of communications professionals’ mission is to open up spaces, whether real or virtual, that people can easily enter and feel that they belong, that they are, as we would say in Australia, one of the ‘mob’.

A central component of transcendence is what I call the human spirit, ‘the intangible, immeasurable, ineffable reality to which all of us need to have access to find meaning in life and to make life worth living – a deeply intuitive sense of relatedness or connectedness to all life, especially to other people, to the world, the universe and the cosmos in which we live; the metaphysical – but not necessarily supernatural – reality which we need to experience to live fully human lives.’(Somerville 2006b, 7-8; Somerville 2015, 93),

I believe fostering a sense of the secular sacred, which I’ve already described, can help us to do that. The sacred identifies and protects that which must not be destroyed.
I have already spoken about the importance of hope. Hope is related to ethics, because, if we have hope, we are more likely to ask ourselves what we owe to future generations and what that means, ethically, we should do and should not do.

Hope is not passive. Just as we make war and make peace – indeed ‘make love’ – we need to intentionally make hope, in other words, eliciting hope needs to be an intentional goal. Striving to leave a legacy of hope can also help us to find meaning, because feeling that our lives will have meaning after we are no longer here, that we will have left a legacy, is part of the search for meaning.

The antithesis of hope is cynicism, which is lethal to the human spirit. Experiences of amazement, wonder and awe are an antidote to cynicism and, thereby, a protector and even promoter of hope.

Consequently, my question is: What can Catholic communications professionals do to counteract cynicism and foster hope? Their message should be for and comprehensible by everyone, not just Catholics.

**Conclusion**

So, to summarize: We need a re-enchantment of the world, an experience most people in the past found through religion. We need opportunities to experience transcendence, which were also often found through religion. And we need hope, which too was frequently found through religion.

The role of Catholic communications professionals is to ponder how they can deliver messages of re-enchantment, transcendence, and hope to a world that perceives itself as a religious, and how they can evoke responses of amazement, wonder and awe in their audiences. If they succeed, the complexity, uncertainty and potentiality that decisions about values involve will be recognized and taken into account resulting in more ethical decisions.

Catholic communicators should not be afraid to do as I suggest. Here’s the advice of Anglican Bishop N.T. (Tom) Wright: ‘Do you know what the most frequent command in the Bible turns out to be? What instruction, what order, is given, again and again, by God, by angels, by Jesus, by prophets and apostles? What do you think – “Be Good”? “Be holy, for I am holy”? Or, negatively, “Don’t Sin”? “Don’t be immoral”? No. The most frequent command in the Bible is: “don’t be afraid.”’

It’s wisely said that ‘We can’t judge the ethical tone of a society by how it treats its strongest, most privileged, most powerful members, but by how it treats its weakest, most vulnerable and most in need’.

Catholic communications professionals are very important people in ensuring that the ethical tone of our post-modern Western democracies is maintained at a high level. They must bring to bear their individual and collective human memories and imaginations and at every opportunity speak privately and publically of what they tell us. Everyone without exception is needed to fight the good fight. This is not something that any of us can leave just to others. One of Catholic communications professionals’ important responsibilities is to recruit these values fighters.

It is only by individually and collectively presenting, in a respectful and persuasive way, the values conservatives want to protect and promote that they will be able to
prevail against the ‘simplification process/simplification-force’ underpinning the ‘progressive’ values which are in conflict with their values. They need to counteract the reduction of complexity to simplicity, the conversion of uncertainty to false certainty and of potentiality to presentism, with its sole focus on only individuals and immediate consequences and failure to consider wider and more long-term future consequences for vulnerable people, society and the common good.

It merits pondering that the Oxford English Dictionary’s Word of the Year 2018 is ‘toxic’. It’s described as ‘the word that best captures the ‘ethos, mood, or preoccupations’ of 2018’ and was judged to ‘have lasting potential as a term of cultural significance.’ Might our shared societal values have gone astray?28

Notes

1. I am grateful for the invitation to participate in the “Dialogue, respect and freedom of expression in the public domain” Eleventh Professional Seminar for Church Communications Offices, an initiative of the Pontifical University of the Holy Cross” School of Church Communications, held in Rome 17–19 April 2018, and for the input of conference participants, especially Professor José Maria La Porte. I also thank two anonymous reviewers and Professor Daniel Arasa, editor of Church, Communication and Culture, for their input and suggestions that led to developing this text. That said, the views expressed are my own and all errors and omissions are my responsibility.


7. For example, the Newtown Railway Station in the Inner West Sydney suburb of Newtown, which is on Sydney’s main suburban line, was decorated with rainbow coloured hearts stuck all over the floor of its concourse.

10. See, for example, Carter v. Canada (Attorney General) 2015 SCC 5 (Supreme Court of Canada); Sean Fine, “A “Right to Life” is Not a “Duty to Live””, The Globe and Mail, Feb. 7, 2015, A3
11. For a chart of these repeated attempts see Chan and Somerville 2016
19. For further discussion see Chan and Somerville 2016.
20. The specific date and station were not found, but an internet search yields the quotation from several different sources.
23. Carter v. Canada (Attorney General) 2015 SCC 5. The court ruled that criminally prohibiting physician assisted suicide meant that a person’s life was shortened, because they needed to commit suicide sooner, while still able to do so without assistance, than if assistance were legally available, and this shortening was a breach of the right to life. In effect, the court converted the right to life to a right to assisted suicide.

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Among her many other honorary degrees and awards, Somerville was made a Member of the Order of Australia in 1990 ‘for service to the law and to bioethics’. She is also a Fellow of the Royal Society of Canada. In 2004 she was chosen by an international jury as the first recipient of UNESCO’s Avicenna Prize for Ethics in Science.

Margaret Somerville has given evidence and consulted to a wide range of government committees and enquiries dealing with controversial social values conflicts and to international and national bodies on matters raising bioethical issues.

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