UNIVERZITA KARLOVA Fakulta sociálních věd Institut mezinárodních studií

PROTOKOL O HODNOCENÍ DIPLOMOVÉ PRÁCE (Posudek oponenta)

Práci předložil(a) student(ka): Marija Kovalenko

Název práce: The Problematics of the Evolution of Euthanasia and Assisted Suicide in the United States of America in relation to the Development of Global Human Rights

1. OBSAH A CÍL PRÁCE (stručná informace o práci, formulace cíle):

Marija Kovalenko's thesis aims to "provide an analytical synopsis of the issue of euthanasia and physician-assisted dying in the United States of America and perspective taking on concern for tolerance of euthanasia and physician-assisted suicide as a legalized rational choice of contemporary American society and the public health sector and points to the need for further debate" (p. 2). The author also aims to examine how global development of human rights has impacted the discussion over euthanasia and physician-assisted dying in the United States.

2. VĚCNÉ ZPRACOVÁNÍ (náročnost, tvůrčí přístup, argumentace, logická struktura, teoretické a metodologické ukotvení, práce s prameny a literaturou, vhodnost příloh apod.):

After the introduction (chapter 2) and literature overview (chapter 3), the author provides a basic historical outline of the development of the discussion over euthanasia and physicianassisted suicide in the United States. In chapter 5, the author explains the terms "euthanasia" and "physician-assisted dying". To provide for the American context, the author briefly mentions Dr. Jack Kevorkian, nicknamed Dr. Death (p. 14), whose rather controversial medical practice in the 1990s brought the discussion on euthanasia to the forefront of American public discourse. The author however does not mention that Dr. Kevorkian's practice was so controversial that he was convicted of second-degree murder and served several years in prison. In chapter 6, the author describes the theoretical framework used. On p. 15, she writes, in a rather complicated language, that "quantitative data analysis and qualitative data analysis of the nature of the examined phenomenon will be presented for the purpose of study concerning arguments in favor and against physician-assisted suicide and specific characteristics of various types of pro and contra arguments with general differentiation used for support of refusal of euthanasia and physician-assisted suicide. Data analysis are (sic) conducted in the context of approach to the elucidation of assisted dying practices in the context of the globalization tendencies and interrelationship between the analysis of the development of the phenomenon in the United States of America and the analogous phenomenon in European countries." The author then proceeds to explain rational choice theory, without connecting it particularly to the studied topic. Subsequently, subchapter titled Qualitative Research examines the different arguments for and against euthanasia. Here, in this chapter, I am missing the sources of the cited opinions (e.g., on p. 19, there are no references) as well as tying the topic to the discussion in the United States. The same applies for the subsequent subchapter called Quantitative research, which provides a plethora of statistics, but it is not clear to what end. In this subchapter, the author mentions statistics from Oregon. However, she does not explain why Oregon is the state that deserves the attention - in fact, it would be advisable to mention that Oregon was one of the states that pioneered euthanasia in the 1990s by supporting Death with Dignity Act in a state-wide referendum. This in itself would merit a case study on its own, as the Act was controversial and subject to several challenges in front of a court - with possible repercussions for other states considering similar policies.

Chapter 7, titled "The context of human rights and the respect for individual autonomy in American society" repeats some of the arguments from the discussion about morality and ethics of euthanasia in the context of human rational decision-making and organ donation.

Chapter 8, titled "The globalization of human rights in the context of transnationalism" is very vague and vague link to the United States. The chapter also refers to some statistical information (p. 31) claiming that there were 900 cases annually of administering a lethal substance without an explicit request of the patient, but the reader does not find out whether the author talks about the United States or some other country.

Chapter 9 takes a look at religious aspects of euthanasia, with particular attention to the Protest and Catholic Church. Here, the author works with statements by American church representatives.

In chapter 10, the author examines some of the key topics in the euthanasia debate in the context of the United States. She looks at the growth of life expectancy and its impact on human health, advances in the medical field, the cost of palliative care and related costs-benefit decisions, public opinion (although the author works with outdated surveys from the 1990s - see p. 42). These however are not all of the controversies that are part of the discussion on euthanasia and physician-assisted dying - for example, medical professionals' conscience and their own autonomy to make decisions should be taken into account.

In the final chapter, the author concludes that there must be a "strict compliance with the ethical standards and legal measures, thoroughly articulated medical indications, and a transparent rigorous approach to patients in health care management" (p. 42), that American public opinion is "diverse, ambiguous and differ from the opinion of the representatives of the American medical diaspora (sic)" (p. 42). She goes on to establish that the argument of autonomy as a fundamental condition for decision on euthanasia or physician-assisted dying - here, it is not clear whether the author means the patient, their doctor or both. She however also points out that there is a dilemma "whether a patient in the terminal state of a serious illness is able to reflect on his preferences and apply them to current situations" (p. 44) and similar doubts arise in case of patients with dementia or serious mental condition (p. 46), which partially undermines the reliance on the rational actor model, as there are situations when human being may not be making rational decisions.

3. FORMÁLNÍ A JAZYKOVÉ ZPRACOVÁNÍ (jazykový projev, správnost citace a odkazů na literaturu,

grafická úprava, formální náležitosti práce apod.):

The text is extremely difficult to read. The author used complicated language, pleonasms, and circumlocution. The text is rich with footnotes, but these are often so randomly placed that it is not clear what the author is referring to - see e.g., p 32. In several cases, the author provides direct quotes, however, these are not attributed to any expert in the field. The author also uses abbreviations, but does not explain what they stand for - e.g., on p. 21, she writes about OHD. In bibliography, the author could have divided the sources into books, scholarly articles, and online resources.

4. KONTROLA ORIGINALITY TEXTU

Prohlašuji, že jsem se seznámil/a s výsledkem kontroly originality textu závěrečné práce v systému:

[X] Theses [] Turnitin [] Ouriginal (Urkund)

Komentář k výsledku kontroly:

Based on a report from THESES, there is no overlap, and therefore, the presented thesis is an original text.

5. STRUČNÝ KOMENTÁŘ HODNOTITELE (celkový dojem z diplomové práce, silné a slabé stránky, originalita myšlenek, naplnění cíle apod.):

While Marija Kovalenko should be applauded for selecting such a difficult and challenging topic, the text itself was extremely difficult to read and navigate. It lacks focus and a clear goal; the organization of the text could have also been more straight-forward. The title of the thesis in itself is misleading. The author primarily focuses on the philosophical, ethical, and moral discussion within the medical profession about euthanasia and physician-assisted suicide, without much focus to the specifics of the United States. I was completely missing a discussion of the development of legislation on euthanasia and physician-assisted dying in individual U.S. states and how these fared in front of American courts, which would have provided a better insight into how Americans approach this issue. At the same time, if the author's ambition was to review how development of global human rights has impacted the discussion over euthanasia in the United States, I am also missing a clear description of the changes in these rights (as a framework of reference) that could have then been compared with the theory and practice in the United States.

The historical overview of Americans' approach towards euthanasia, which covers pages 10-13, could have been much longer and could have provided a more in-depth analysis of the topic. The chapter also in some segments does not follow chronology and contains confusing statements - e.g., on p. 13, the author mentions that the right to die "has been (sic) authenticated by the Supreme Court", without mentioning the case. On the same page, the author claims that "respondents in the U.S. state of Oregon in 1994 held a national referendum", but it is not clear how Oregon could have held a national referendum (the author probably means a referendum held by the state of Oregon).

The division into chapters and their organization is puzzling too. The author starts with an introduction marked chapter two (chapter 1 is missing entirely). In the chapter called *Literature review*, the author describes the content of several book chapters and scholarly studies, but it is not particularly clear how they tie to the topic and the United States. It is also not clear whether any of these academic sources are authoritative and how they were selected. For example, it would make sense to explain that the frequently cited Dr. Josef Kuře is focusing on social medicine and bioethics. Selection of Dr. Stoilov as a voice on euthanasia and physician-assisted dying is also bizarre, as he is an internist from Beroun and has no relation to this discussion in the United States.

The conclusion is again not particularly related to the United States and is rather vague. The author concludes on p. 47 that "the debate about the evolution of euthanasia and assisted suicide in the United States with an emphasis on human rights in the context of globalization trends and social interactions concerns the argumentation and counterargument of this phenomenon and the development of legislative norms, whereas it is equally important to consider a deep philosophical conception of the authentic values of life and death." This of course is true; however, I am missing concrete demonstration of this in the context of the United States - both in historical perspective as well as in the contemporary discussions, which take into account some of the phenomena mentioned by the author (aging of the society, cost of palliative care etc.).

OTÁZKY A PŘIPOMÍNKY DOPORUČENÉ K BLIŽŠÍMU VYSVĚTLENÍ PŘI OBHAJOBĚ (jedna až tři):
1. What are some of the most important barriers in U.S. states that prevent legislative changes that would allow some form of euthanasia or assisted dying? What are the legislators' concerns? And what is the approach of medical providers? Is there at least some consensus?
2. Which states in the United States currently allow some form of euthanasia or physician-assisted suicide? And how is this procedure carried out under their respective legislation?

3. Have there been any landmark cases on this topic decided by the Supreme Court? How has the SCOTUS approached this issue?

7. DOPORUČENÍ / NEDOPORUČENÍ K OBHAJOBĚ A NAVRHOVANÁ ZNÁMKA

(A a B výborně, C a D velmi dobře, E dobře, F nevyhověl):

I recommend the thesis for defense, however, given my reservations above, I recommend grade D-E, based on the performance during the defense.

Datum:September 1, 2022

Podpis: Jana Sehnálková

Pozn.: Hodnocení pište k jednotlivým bodům, pokud nepíšete v textovém editoru, použijte při nedostatku místa zadní stranu nebo přiložený list. V hodnocení práce se pokuste oddělit ty její nedostatky, které jsou, podle vašeho mínění, obhajobou neodstranitelné (např. chybí kritické zhodnocení pramenů a literatury), od těch věcí, které student může dobrou obhajobou napravit; poměr těchto dvou položek berte prosím v úvahu při stanovení konečné známky.