

Research Article

Perception of Health Personnel Toward Euthanasia at the University of Abuja Teaching Hospital

***^aYalma, R.M. and ^bMustapha Fatima**

^{a&b}Department of Community Medicine, Faculty of Clinical Sciences, University of Abuja, Nigeria

*Corresponding Author Email: yrmsheliza@yahoo.com

Received: June 24, 2025

Accepted: July 16, 2025

Published: July 22, 2025

Abstract

Euthanasia remains one of the most debated topics in bioethics, particularly in religious and culturally sensitive regions. Healthcare providers play a crucial role in end-of-life care and their perceptions significantly influence how euthanasia is approached. This study investigates the perception of health personnel toward euthanasia at the University of Abuja Teaching Hospital. A descriptive cross-sectional study was conducted involving 213 health personnel using cluster sampling and a structured self-administered questionnaire. Data was analyzed using SPSS version 21. Perception was scored using an 11-item instrument; scores above 21 indicated good perception. Of the 202 respondents who completed the survey, 107(53%) had poor perception while 95(47%) had good perception. Perception varied based on gender, religious affiliation, profession, and years of experience. The study reveals a generally poor perception of euthanasia among healthcare workers, significantly shaped by religious and cultural beliefs. Educational and policy-level interventions are recommended to enhance ethical awareness in end-of-life decision-making.

Keywords: Euthanasia, Perception, Healthcare Personnel, Bioethics, Nigeria, End-of-Life Care.

Introduction

Euthanasia, derived from the Greek word meaning 'good death,' refers to the practice of intentionally ending a life to relieve pain and suffering [5]. It is a controversial subject encompassing ethical, legal, and cultural dimensions. In many parts of the world, including Nigeria, the topic evokes strong reactions due to prevailing religious and moral values [1, 2]. In this context, perception towards euthanasia among health professionals becomes critical, as their beliefs and values can directly affect patient care, especially in palliative settings [3, 7, 8]. Despite growing debates on legalizing euthanasia in various jurisdictions, in Nigeria, the subject remains taboo and criminalized under most laws [1]. This study explores how health personnel perceive euthanasia in a tertiary health facility in Nigeria, thereby adding to the scant body of local empirical evidence on the issue.

Background

Globally, perception towards euthanasia varies widely [4, 8]. In countries such as the Netherlands and Belgium, euthanasia has been legalized under strict regulatory frameworks [3, 8]. In contrast, countries with predominant religious populations, such as Nigeria, Saudi Arabia, and India, generally oppose its legalization [1, 2]. Studies in Europe have shown that healthcare providers often support euthanasia when legal safeguards are in place [3, 7, 8]. However, even in those contexts, concerns about moral implications persist [4].

In Nigeria, cultural and religious diversity adds layers of complexity to the euthanasia debate [1, 2]. Traditional African beliefs, Islam, and Christianity form the core of ethical perspectives in the country. Understanding the perception of healthcare providers becomes essential in guiding future discourse on this sensitive topic.

Methodology

A descriptive cross-sectional study design was employed at the University of Abuja Teaching Hospital (UATH), Gwagwalada. A total of 213 health personnel, including doctors, nurses, and midwives, were

recruited using cluster sampling. Self-administered structured questionnaires were used for data collection. The perception assessment section comprised 11 questions with Yes/No/Don't Know options. Scores were summed, with scores of 22–33 indicating good perception and 21 or less indicating poor perception.

Ethical clearance was obtained from the UATH Research Ethics Committee. Written and verbal consent was secured from all participants. Data were coded and analyzed using SPSS version 21. Statistical significance was considered at $p < 0.05$.

Results

The analysis was based on 202 completed questionnaires. Among the respondents shown in Table 1, 107(53%) had poor perception towards euthanasia, and 95(47%) had good perception. Younger age groups showed relatively better perception compared to older professionals. Male respondents (71.2%) demonstrated better perception than females (28.8%). Christian participants were more likely to report good perception than Muslims. Doctors showed better perception levels compared to nurses and midwives.

Table 1. Association between sociodemographic characteristics and perception towards euthanasia.

Variables	Poor perception	Good perception	P-value
Grouped age			
18-22	3	0	0.063
23-27	17	18	
28-32	29	18	
33-37	20	24	
38-42	18	18	
43-47	10	11	
48-52	6	1	
53-58	7	2	
Gender			
Male	57	68	0.022
Female	49	28	
Marital status			
Married	71	58	0.233
Single	30	36	
Others	6	1	
Ethnicity			
Hausa	9	21	0.286
Igbo	19	32	
Yoruba	12	23	
Others	47	39	
Religion			
Christianity	84	81	0.213
Islam	23	14	
Profession			
Doctor	69	71	0.284
Nurse	29	18	
Midwife	9	6	
Number of years of practice			
<5	39	35	0.416
5-10	33	38	
11-20	26	14	
21-50	9	8	

Perception was inversely proportional to years of practice-those with fewer years in practice were more likely to have a good perception of euthanasia.

Discussion

The findings indicate a general trend of poor perception towards euthanasia among Nigerian health professionals. Cultural and religious biases remain prominent barriers. These results align with studies conducted in other conservative societies, where euthanasia is perceived as morally and legally unacceptable

[1, 2]. In particular, the dominance of Christian respondents and their better perception could be linked to higher exposure to ethical debates in formal training.

The significant gender disparity observed-male professionals being more open to considering euthanasia from an ethical perspective-echoes earlier work suggesting that underlying belief structures strongly influence attitudes [4]. The fact that doctors reported better perception compared to nurses and midwives also supports the notion that professional training plays a key role in ethical reasoning [7, 8]. Persistent cultural and religious barriers identified in this study are consistent with broader African and Middle-Eastern literature [1, 2].

Conclusion

The study concludes that the perception of euthanasia among health professionals at UATH is largely poor. This is shaped by deeply rooted socio-cultural and religious norms. Improving awareness, ethical education, and policy clarity on end-of-life care are essential for enhancing the quality of care delivered to terminally ill patients.

Recommendations

- 1) Incorporate end-of-life ethics into undergraduate and postgraduate medical training [6].
- 2) Organize regular workshops and seminars for health personnel on palliative care and ethical decision-making [6].
- 3) Develop clear institutional policies on do-not-resuscitate (DNR) orders and palliative sedation [6].
- 4) Engage religious and community leaders in public awareness campaigns [9].
- 5) Initiate qualitative studies to explore the deeper cultural reasons behind resistance to euthanasia [10].

Declarations

Acknowledgments: We gratefully acknowledge all our respondents and colleagues who contributed to this paper.

Author Contributions: YRM: Concept, design of study, literature survey, data collection, data analysis, manuscript preparation, statistical analysis and interpretation, editing, and manuscript revision; MF: Concept, design, literature survey, data collection, data analysis, prepared first draft of manuscript and manuscript review.

Conflict of Interest: The authors declare no conflict of interest.

Consent to Publish: The authors agree to publish the paper in International Journal of Recent Innovations in Academic Research.

Data Availability Statement: The data presented in this study are available upon request from the corresponding author.

Funding: This research received no external funding.

Institutional Review Board Statement: The researchers obtained ethical approval from our institution's review committee.

Informed Consent Statement: Written consent was obtained from every respondent who participated in the study.

Research Content: The research content is original and has not been published elsewhere.

References

1. Therese, M.A., Rukumani, J., Mano P.P., Ponrani and Nirmala. 2014. A study to assess the level of attitude towards euthanasia among health personnel. Nitte University Journal of Health Science, 4(4): 18-23.
2. Mogadasian, S., Abdollahzadeh, F., Rahmani, A., Ferguson, C., Pakanzad, F., Pakpour, V. and Heidarzadeh, H. 2014. The attitude of Iranian nurses about do not resuscitate orders. Indian Journal of Palliative Care, 20(1): 21-25.
3. Gielen, J., Van den Branden, S., van Iersel, T. and Broeckaert, B. 2009. Flemish palliative care nurses' attitudes toward euthanasia: A quantitative study. International Journal of Palliative Nursing, 15(10): 488-497.
4. White, K.M., Wise, S.E., Young, R.M. and Hyde, M.K. 2009. Exploring the beliefs underlying attitudes to active voluntary euthanasia in a sample of Australian medical practitioners and nurses: A qualitative analysis. OMEGA-Journal of Death and Dying, 58(1): 19-39.
5. Emanuel, E.J. 1994. Euthanasia: Historical, ethical, and empiric perspectives. Archives of Internal Medicine, 154: 1890-1901.

6. Gastmans, C., Van Neste, F. and Schotsmans, P. 2004. Facing requests for euthanasia: A clinical practice guideline. *Journal of Medical Ethics*, 30(2): 212-217.
7. Verpoort, C., Gastmans, C. and Casterle, B.D.D. 2004. Palliative care nurses' views on euthanasia. *Journal of Advanced Nursing*, 47(6): 592-600.
8. Inghelbrecht, E., Bilsen, J., Mortier, F. and Deliens, L. 2009. Nurses' attitudes towards end-of-life decisions in medical practice: A nationwide study in Flanders, Belgium. *Palliative Medicine*, 23(7): 649-658.
9. Oliver, P., Wilson, M. and Malpas, P. 2017. New Zealand doctors' and nurses' views on legalising assisted dying in New Zealand. *The New Zealand Medical Journal (Online)*, 130(1456): 10.
10. Demedts, D., Roelands, M., Libbrecht, J. and Bilsen, J. 2018. The attitudes, role and knowledge of mental health nurses towards euthanasia because of unbearable mental suffering in Belgium: A pilot study. *Journal of Psychiatric and Mental Health Nursing*, 25(7): 400-410.

Citation: Yalma, R.M. and Mustapha Fatima. 2025. Perception of Health Personnel Toward Euthanasia at the University of Abuja Teaching Hospital. *International Journal of Recent Innovations in Academic Research*, 9(3): 78-81.

Copyright: ©2025 Yalma, R.M. and Mustapha Fatima. This is an open-access article distributed under the terms of the Creative Commons Attribution License (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.