We are young people of diverse, ethnic, religious, cultural and socioeconomic backgrounds from all regions of the world. We affirm that each human being possesses intrinsic and inalienable dignity from conception until natural death. While we recognize the importance of medical and technological development in upholding the value of every human life, we condemn practices that violate their dignity. The dignity of the human person must be cherished in custom, protected by law, and safeguarded in all settings within all levels of society.

Healthcare providers have a moral and legal duty to accompany persons throughout their lives. As agents of healing and care, they welcome the newest members of our human family and attend to those in their final days. As such, no procedure that disrupts the natural beginning or ending of life can be in line with fundamental principles of medical care. The practice of their profession, therefore, requires not only high levels of skill and research but also clear ethical guidelines in line with bioethics to ensure that the dignity of the person is respected in all medical procedures and practices. Bioethics is the application of ethical principles grounded in the dignity of the human person, to the fields of medicine and biological research. Specifically, the use of reproductive technologies, the practice of surrogacy, and the practices of assisted suicide/euthanasia fundamentally violate the dignity of the person as well as contradict the principles of bioethics.

Surrogacy is a practice in which a woman becomes pregnant in order to give the child to someone else at birth, typically through the use of assistive reproductive technologies. The use of women for gestational services as surrogate mothers amounts to the commodification of parenthood, children, and both male and female bodies by placing each at the service of a contract. Surrogacy objectifies women and thus reduces them only to their reproductive capacities, exposing them to personal and economic exploitation and health risks.

We affirm the value of the family and recognize the human longing to give oneself as a parent and the suffering caused by infertility. We encourage bioethical research and treatment of all conditions in order to restore the body’s natural capacities. These treatments should never compromise the rights of the child, in particular the rights to parenthood, nationality and identity, as explicited by the international Convention on the Rights of the Child as well as the UN Declaration on Bioethics and Human Rights. Even though surrogacy violates these children’s rights, we uphold the dignity of every child born via such procedures.

Those facing the end of their lives also deserve to have their dignity respected. We regret that the term “death with dignity” is used to describe euthanasia and assisted suicide. In these practices, healthcare professionals administer or provide life-ending drugs to patients. We reject these practices, even when done out of a desire to end suffering. We believe that they treat human dignity as dependent on health and autonomy. Persons with disabilities are discriminated against by wrongfully being offered euthanasia and assisted
NEW YORK, 2018

DECLARATION ON HUMAN DIGNITY AND BIOETHICS

suicide by healthcare professionals who deem their lives unbearable. Permitting such practices violates the dignity of those most vulnerable, due to age, disability, or other conditions and characteristics, by equating it with personal utility and ability.

We commit to live in solidarity with everyone experiencing terminal illness or other difficult medical conditions. Solidarity is built on the use of freedom to willfully recognize fundamental human needs, desires, and rights, and to authentically pursue their fulfillment for all persons. We affirm that the person is a source of creativity and is never a burden but at every stage of life contributes to the common good of society by virtue of his or her existence. We believe that persons and their families should receive appropriate medical, physical, and psycho-social support and care. We encourage practices such as palliative care which do not end human life but that accompany the dying and their families. Euthanasia and assisted suicide should never serve as forms of palliative care.

Therefore, we call upon the members of the medical profession, ethicists, policy makers and all stakeholders at the local, national, and international levels to stand in solidarity with all persons particularly those in vulnerable situations to ensure that human dignity is protected at all stages of life.