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RECEIVED 16 April 2024
ACCEPTED 19 April 2024
PUBLISHED 02 May 2024

CITATION
Bartolomé Peral E, Dülmer H and Siegers P
(2024) Editorial: Boundaries of life: attitudinal,
value and political implications on euthanasia,
abortion, reproduction and medical practices.
Front. Polit. Sci. 6:1418192.
doi: 10.3389/fpos.2024.1418192

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Editorial: Boundaries of life: attitudinal, value and political implications on euthanasia, abortion, reproduction and medical practices

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KEYWORDS

beginning and of life, values, euthanasia, abortion, attitudes, assisted reproduction

Editorial on the Research Topic

[Boundaries of life: attitudinal, value and political implications on euthanasia, abortion, reproduction and medical practices](#)

Human development and modernization include political, scientific, and technological changes, that transform human value structures. Important changes in value systems accompanied by transformations in morality structures are frequently traced back to increased physical and economic security in welfare states established in advanced industrial societies after World War II, to massive secularization, and to the growing relevance of equality, for example, regarding gender roles (Inglehart, 1977; Norris and Inglehart, 2003; Inglehart and Welzel, 2005). However, important change have also affected other life domains: advances in medicine and the structural aging of our societies have led to a rising relevance of so-called *Beginning- and End-of-Life Issues* (Lizza, 2009; Hendry et al., 2013).

The development of technology has contributed to this process by open up choices to interfere in biological processes of procreation, expanding the possibilities for childbearing to social groups previously excluded from parenting. This has been contested with ongoing discussion on whether they should be regulated and how. There is further debate regarding the prioritization of the right to have children and the use of surrogacy. Some feminist groups argue that surrogacy is exploitative, while others advocate for the freedom to engage in such practices. The social relevance of medical assistance for procreation has increased in recent decades due to current trends in Europe to postpone parenthood, linked to women's career preferences. This has raised new moral and political questions (Soini et al., 2006) triggering debates on eligibility conditions for techniques such as *in-vitro* fertilization or surrogate pregnancy. Growing demand for autonomous dying has raised public awareness of practices of assisted dying and put pressure on parliaments and governments to regulate euthanasia (Mooney, 2001). The present Research Topic *Boundaries of life: attitudinal, value and political implications on euthanasia, abortion, reproduction and medical practices* builds on specific aspects related to values and attitudes concerning beginning and end of

life issues. It highlights the complexity of these social and political processes in relation to aging, delayed maternity, abortion, and the reactions of society against practices that become part of the so-called “cultural war” in Europe.

The six contributions covered by the present Research Topic focus mainly on attitudes toward life and death in a broader sense, and more particularly euthanasia, assisted reproduction and abortion. In their contribution “*The impact of far-right political orientation and cultural values on conservative attitudes toward life and death in Europe: a multilevel approach*,” Ramos et al. analyzed the relationship between far-right political orientations and cultural values on conservative attitudes toward issues of life and death in Europe. Their results confirmed the positive influence of far-right political orientations on conservative attitudes toward life and death issues, and the negative impact of country’s economic performance, inequality, and religious heterogeneity on attitudes. By testing for cross-level interaction terms, it turned out that the impact of far-right political orientations on conservative attitudes was only significant in countries with low economic performance, with high social inequality, and in countries with post-materialist value orientations.

Two contributions addressed the Research Topic euthanasia and assisted dying. The article by Vissers et al., titled “*Characteristics and outcomes of peer consultations for assisted dying request assessments: cross-sectional survey study among attending physicians*,” is based on a cross-sectional survey conducted in Belgium 2019–2020 among attending physicians who had consulted a trained consultant for an assisted dying request assessment. Most of those attending physicians were general practitioners, more than half of the patients had cancer and were 70 years or older. The main context for these consultations were suffering without prospect of improving, loss of dignity in pain in and tiredness of life in. And the main reasons for the consultation were the expertise, and the independence of the consultant. The contribution by Tormos et al. “*Patterns of change in the justifiability of euthanasia across OECD countries*” focused on attitudes of laypeople on euthanasia in comparative perspective by covering a time period from 1981 to 2021. By using dynamic comparative multilevel regression and comparative cross-classified random effects regressions they found an increase in euthanasia’s justifiability in all surveyed, not only within-cohort but also across time, being younger cohorts more permissive than their older counterparts.

In their contribution “*Abortion and euthanasia: explanatory factors of an association in Thanatos. Analysis of the European Values Study*” Silvestre et al. investigated the impact of personal characteristics on the moral justifiability of abortion and euthanasia and explored their belonging to latent factors extracted from 15 items covering the justifiability of morally debatable behaviors as dishonest-illegal issues, questions of life, death, and sexual relations. Based on the European Values Study 2017, their results show that among sociodemographic background variables religiosity turned out to be the most important predictor for euthanasia and abortion in Europe. The four-factor structure extracted by exploratory principle component analysis shows that both issues belong to the same factor called “Eros/Thanatos.”

The final two contributions focussed on assisted reproduction. In their contribution “*More benefit or harm? Moral contextualism shapes public attitudes towards social egg freezing*,” Forke and Siegers studied the factors shaping the acceptance of social egg freezing (or oocyte cryopreservation) as an assisted reproduction technology (ART). Based on a factorial survey experiment conducted in Germany 2016 the authors found that factors associated with potential harm to the children decreased the acceptance of cryopreservation, whereas factors associated with potential harm to the women increased acceptance. The contribution by Aurekoetxea-Casaus et al., titled “*Gender differences in attitudes toward assisted reproduction in the Spanish population: the weight of religiosity and conservatism*,” analyzed attitudes toward different possibilities of assisted reproduction, different approaches on infertility and other genetic dilemmas. Based on a representative sample of 1,030 Spanish respondents, their findings show, among other things, the high acceptance of ARTs by the Spanish population and revealed significant gender differences. Women accepted ARTs for infertility and genetic disorders, while men accepted ARTs for choosing a baby’s sex.

In summary, the contributions to this Research Topic reveal a dynamic shift in attitudes toward the beginning and end of life. Overall, the public is gradually becoming more supportive of autonomous choices at the end of life. However, autonomy remains contested—especially by religious and conservative actors who slow the pace of attitudinal change. For regulatory issues, the results show that the particular settings in which medical technologies are used are relevant for their justifiability: the context of action is highly relevant for individual judgments, and political regulation can use the limits of acceptance as a factor to define how to secure individual autonomy by limiting potential harm.

Author contributions

EB: Conceptualization, Investigation, Project administration, Supervision, Writing – original draft, Writing – review & editing. HD: Conceptualization, Investigation, Methodology, Project administration, Writing – original draft, Writing – review & editing. PS: Conceptualization, Investigation, Methodology, Project administration, Writing – original draft, Writing – review & editing.

Funding

The author(s) declare financial support was received for the research, authorship, and/or publication of this article. This work was supported by the Spanish Ministry of Science and Innovation under Grant: PID2019-106882RB-I00 and by the DFG-German Research Foundation under Grant: BE 4267/2-1.

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