‘Playing roulette with the human life’:
Religion and parliamentary debate on assisted dying and euthanasia, 1997-2012

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Introduction

The latest parliamentary debate and vote on euthanasia (otherwise called assisted suicide or assisted dying) was held in the 1960s, which ‘is pretty scandalous’, as pointed out by Eleanor Laing (HC Debate 2010-12, 1423). However, in the past 15 years, there has been several re-visits of this topic and debates on related motions in the light of legal precedents (e.g., the Tony Bland case, and most recently the Debbie Purdy and Tony Nicklinson cases). Tabled in a series of Private Member’s Bills in the 1997 and 2010 Parliaments, the matter was considered a matter of individual conscience and free votes in the respective divisions were given. In all those instances the House voted against the change of the legal status of assisted dying that is qualified under the Suicide Act 1961 (Lipscombe and Barber 2014).

Nonetheless, the change of the guidelines in respect of cases of encouraging or assisting suicide initiated by the Crown Prosecution Service (DPP 2010), as well as the efforts of the pro-choice campaigners and changing public opinion in support of assisted dying suggest that next Parliament might witness a vote on a bill regarding euthanasia (e.g., The Guardian 2014, November 8; YouGov 2014, June). In particular, the House of Lords is currently considering the Assisted Dying Bill, a Private Member’s Bill introduced by Lord Falconer of Thoroton that aims to enable competent adults who are terminally ill to be allowed assistance with ending their life if they request it (Lipscombe and Barber 2014). The Government has recently made clear that it would not stand in the way of a change in the law, and that a free vote on a Bill will be given (The Independent 2014, March 8). Considering that any change to the current legislation on assisted dying contradicts the positions of all organised religious denominations, the debate and voting on such a Bill promises to reflect on the role of religion in morality politics and religious identity as a factor of decision-making in a legislature when MPs are encouraged to vote with their conscience.

Considering the growing relevance of the role of religion in the debate on assisted suicide and morality politics, in general, as suggested by the recent voting on the Same-Sex Marriage Bill (The Independent 2015, February 5), this paper explores what impacts (if any) MPs religious backgrounds had on their voting and contributions to parliamentary debates on motions regarding assisted dying since 1997. It examines whether there was a distinct divide in how MPs from conservative religious denominations, especially Catholicism and Judaism, voted on this issue compared to other Members, and whether these backgrounds affected the content of their arguments in respect to assisted dying since 1997.

This is an exploratory study that builds on the previous research examining the effect of religion on the public and elite behaviour and attitudes to the issues of life and death such as abortion in Britain. It used them to explore a new research case – the effect of religion on
parliamentary voting and debates on assisted suicide – bridging a gap in the academic literature. Given the limited amount of the available data – three voting divisions and four parliamentary debates on motions and Private Member’s Bills – the results of the study are suggestive rather than generalizable. They aim to create a framework for the future study in anticipation of more data to come in the following parliamentary sessions. Therefore, this paper is a hypothesis building rather than hypothesis testing exercise that uses a deductive approach to the analysis of voting records and the content of parliamentary debate.

The paper demonstrates that the effects from a religious background on the behaviour of Jewish and Catholic MPs vary. They are associated with the strength of religious belief and the type of religious denomination. Although traditional Judaism and Catholicism are equally critical of ‘playing roulette with human life’ (e.g., Glover 1990; Schenker 2000; Blyth and Landau 2009), the degree of conformity with this principle varies across MPs from these backgrounds affected by the personal experiences and political ideologies of the Members.\(^1\) It also depends on the level of heterogeneity of the respective faith communities and its structure (Minkenberg 2003). Therefore, Catholics exhibit the most conformity with the position of the Holy See, whereas the divisions within the British Jewry and ideological differences between the Jewish congregations could explain the diversity of opinions expressed by MPs from Jewish backgrounds.

Overall, the results of the analysis support the earlier assumptions that Catholic MPs take a conservative stance on the issues of life and death, which is particularly obvious in parliamentary debates and voting on assisted suicide. However, the analysis casts doubts that all Abrahamic faiths manifest themselves in political behaviour and attitudes in a similar way by demonstrating striking differences between Members from Catholic and Jewish backgrounds in their voting preferences and contributions to debates. Variations in their behaviour can be explained by the differences in the structure of religious denominations and political ideology of individual MPs.

**Background**

Religion is proven to have a significant effect on public attitudes towards the issues of life and death such as abortion, euthanasia and embryo research in Britain and across Western democracies, as well as on policy-making and outputs in morality politics (e.g., Heichel et al. 2013; Studlar et al. 2013; Clements 2014). Previous studies especially highlighted the impacts from different configurations of Church-State relationships and the degree of institutionalization of

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\(^1\) Previous studies point at the similarities in the approaches to the issues of life and death across all monotheistic religions, including Christianity, Islam and Judaism. However, given that there was only one Muslim MP in the 1997 Parliament - Mohammad Sarwar – and he was absent from all three votes on assisted dying, the study focuses in MPs from Jewish and Catholic backgrounds.
religion in society (Warner 2000; Minkenberg 2003; Fink 2008). As an institutional actor in morality politics (Warner 2000; Fink 2008), organised religion has also been proven to affect the behaviour and attitudes of the political elite. For instance, when a free vote is given, British Catholic MPs adopt a pro-life stance on abortion (Hibbing and Marsh 1987; Baughman 2004; Cowley and Stuart 2010).

Parliamentary voting as the focus of this study is determined by its importance for public policy, as well as its significance for the public. Although there are many steps to the legislative process, and each proposal goes through various preparation stages, voting opens the way for it to become a law and a part of public policy. The straightforward link between parliamentary voting and policy-making puts voting behaviour in the spotlight of academic and public interest whilst re-asserting the policy impact of Parliament (Russell and Benton 2009).

Although, the analysis of parliamentary voting usually starts from examining the levels of dissent amongst the parliamentary party (e.g., Cowley 2002), the purpose of this paper requires a different approach. Being focused on how (if at all) religious identity is manifested in parliamentary voting and debate on assisted dying, it focuses on the content of the motion and the meaning of particular voting options in relation to the positions of certain faith communities. Although these positions can correspond to the party ideology, especially in the case of the Conservative Party, using a party vote as a baseline for analysis can be misleading in the case of their parties that do not necessarily articulate the position a party takes in free votes. Nonetheless, keeping in mind party ideology, therefore, helps to identify the party position and explain why MPs often remain loyal to the party ideology even when they have a right to disagree (Norton 2001). Therefore, the party ideology, rather than a party vote, is worth considering – alongside MPs’ religious backgrounds that are the main purpose of this study that is conducted in a relatively flexible environment when the party discipline is loosened, and Members are encouraged to vote with their conscience (Christoph 1958; Hibbing and Marsh, 1987, Cowley and Stuart, 2010, November 8).

The analysis is conducted on the content of parliamentary debate and voting in free votes that are given by the party managers to allow MPs to vote according to their beliefs and conscience on sensitive topics, such as voting rights for prisoners, abortion, or euthanasia (Pattie et al. 1998). They are identified on the basis of the Parliamentary Information List that contains known free votes for Labour, Conservative and Liberal Democrat Members in the Commons since November 1997 (House of Commons 2013). The analysis includes free votes on assisted dying and euthanasia.

Previous research suggests that there are differences in voting between Catholic parliamentarians and the rest of the House on abortion, even when differences on other votes are negligible (Baughman 2004). The same logic can be applied to politicians from Jewish, Muslim and Catholic religious backgrounds on other issues of life and death, bearing in mind that the positions of
the Chief Rabbinate and the Holy See on these issues are rather close (Schenker 2000). As a result, it is likely that the voting of Jewish and Catholic MPs – especially practicing Jews and Catholics – on euthanasia as a major issue of life and death echoes the concerns of faith communities encouraging them resist the change of the current legislation on this matter. Parliamentary voting and debates on assisted dying is, therefore, a straightforward case that is expected to demonstrate a clear divide between religious and non-religious public and triggers strong reactions from across traditional faith communities (Clement 2014).

Accounting for the recent changes in the way religion is manifested in public life and politics (e.g., McLennan 2010; Davie 1994; Woodhead and Catto 2012), this study defines religious identity on the basis of socio-cultural values, rather than religious practices (Beckford 2003, 16). This approach is particularly effective in the context of political behaviour, when religious identity is not strictly a question of religious practice, but rather belonging to a religious minority and sharing a certain cultural background. It is useful to treat religion as a moral code and a unifying resource, rather than a set of spiritual beliefs and practices (Bruce 2009, 14; O’Brian and Smith 2009, 730). Focusing on institutional, social and cultural aspects of identity, rather than spirituality, allows the inclusion of secular or non-religious politicians who are connected with communities via non-religious practices, but shared socio-economic, cultural values, and a code of behaviour (Lazar et al. 2002; Sinno 2008). Based on these arguments, religious identity is operationalised as a religious background expected to affect the voting behaviour and contributions to debates made by MPs from Jewish and Catholic backgrounds.

**Data and methods**

The analysis of the voting behaviour of Jewish and Catholic MPs and their contributions to debates on assisted suicide is based on the publicly available voting records of Jewish and Catholic parliamentarians collected from Hansard (Table 1).

<table>
<thead>
<tr>
<th></th>
<th>Catholic background</th>
<th>Jewish background</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labour</td>
<td>21</td>
<td>48</td>
<td>15</td>
</tr>
<tr>
<td>Conservative</td>
<td>8</td>
<td>26</td>
<td>6</td>
</tr>
<tr>
<td>Liberal Democrat</td>
<td>2</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>79</td>
<td>22</td>
</tr>
</tbody>
</table>

The data on is rather limited and includes three voting divisions and four debates on motions and Private Member’s Bills related to euthanasia and assisted dying held in the House of Commons in the 1997 and 2010 Parliament. This includes ‘Doctor Assisted Dying’ moved by Joe Ashton on 10 December 1997 and the Medical Treatment (Prevention of Euthanasia) Bill, a Private Member’s Bill moved by Ann Winterton on 28 January 2000, with the amendment moved by Andrew Dismore on 14 April 2000, as well as the motion tabled by Richard Ottaway on 27 March 2012.

The analysis explores the voting of Jewish, Catholic and/or Muslim in these divisions using methods of descriptive statistics (frequencies) and the arguments made by Catholic and Jewish MPs in the debates using qualitative content analysis. It links them to the party vote and the positions of their respective faith communities. The party vote is defined as the vote of the majority of the party, whilst the positions of faith communities are identified on the basis of official community sources and reports produced by recognised faith-based bodies (e.g., the Muslim Council of Britain, the Chief Rabbinate, and the Board of Deputies).

Voting on assisted dying and euthanasia, 1997-2000

Previous studies have shown that a Catholic religious background impacts on voting on such issues as abortion and embryo research when a free vote is given (e.g., Cowley and Stuart 2010). However, it has been argued that Catholicism, Judaism and Islam, as traditional strands of the Abrahamic religions affect attitudes on controversial social, including the issues of life and death, in general (Glover 1990; Levy 2007; Clements 2014). Then, voting on euthanasia and assisted suicide should be one of the most telling cases showing the difference in opinions between MPs from Catholic, Jewish and Muslim backgrounds and the rest of the House.

Members from traditional religious backgrounds are expected to oppose any changes of the existing legislation on assisted suicide and euthanasia that are illegal under the Suicide Act 1961. They are expected to vote ‘No’ on ‘Doctor Assisted Dying’ on December 10, 1997 (Table 2) and ‘Aye’ on the Medical Treatment (Prevention of Euthanasia) Bill on January 28 and April 14, 2000 (Table 3).

By voting ‘Aye’ on ‘Doctor Assisted Dying’ on December 10, 1997, MPs supported introducing a bill ‘to enable a person who is suffering distress as a result of his terminal illness or incurable physical condition to obtain assistance from a doctor to end his life’ (HC Debate 1997-98, col. 1025). Although the motion was defeated, Table 2 indicates some differences in attitudes and subsequent voting of Catholic and Jewish MPs.

There are no surprises in the behaviour of MPs from Catholic backgrounds – all 24 Labour, Conservative and Lib Dems Catholic MPs present voted against the motion to bring a bill to allow a terminally ill person to obtain assistance in dying from a doctor. Furthermore, Labour Jim Dobbin
and Tory Ann Widdecombe were both tellers for ‘No’. On the other hand, there is a split along the party lines among the Members from Jewish backgrounds. Five of eight Labour – and the only Liberal Democrat – Jewish MPs present supported the motion compared to the Conservative Jewish Members who unanimously opposed it. The proportion of Labour and Lib Dem Jewish Members who voted to pass the motion is, in fact, higher than that of the rest of the House – 2 : 1 to 2 : 3 – that largely voted against the motion.

Table 2: Voting on 'Doctor Assisted Dying', 10 December 1997, frequency

<table>
<thead>
<tr>
<th></th>
<th>Labour</th>
<th></th>
<th>Conservative</th>
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<th>Lib Dem</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>Aye</td>
<td>No</td>
<td>Absent</td>
<td>Aye</td>
</tr>
<tr>
<td>Catholic</td>
<td>31</td>
<td>0</td>
<td>17</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Jewish</td>
<td>22</td>
<td>5</td>
<td>3</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>576</td>
<td>68</td>
<td>94</td>
<td>220</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>629</td>
<td>73</td>
<td>114</td>
<td>231</td>
<td>5</td>
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</tbody>
</table>

Source: Hansard 1997-98

The voting on the Medical Treatment (Prevention of Euthanasia) Bill demonstrates a similar pattern Table 3. The first motion introduced in relation to the Bill aimed to make it clear ‘to doctors that they cannot intentionally bring about the death of their patients, by action or by omission’ (HC Debate 1999-00, col. 686). The second one confirmed to people responsible for the patients care that it is unlawful ‘to withdraw or withhold from the patient medical treatment or sustenance if his purpose or one of his purposes in doing so is to hasten or otherwise cause the death of the patient’ (HC Debate 1999-00, col. 603). Both motions passed with a strong majority.

Table 3: Voting on Doctor Assisted Dying and the Medical Treatment (Prevention of Euthanasia) Bill, frequency

<table>
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<tr>
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</thead>
<tbody>
<tr>
<td></td>
<td>Aye</td>
<td>No</td>
<td>Absent</td>
</tr>
<tr>
<td>Catholic</td>
<td>0</td>
<td>24</td>
<td>7</td>
</tr>
<tr>
<td>Jewish</td>
<td>6</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Other</td>
<td>82</td>
<td>195</td>
<td>299</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>225</td>
<td>316</td>
</tr>
</tbody>
</table>

Source: Hansard 1997-98; Hansard 1999-00

As shown in Table 3, all Catholic MPs from the three main parties voted in support of both motions, and Joe Benton and Edward Leigh from the Labour and Conservative parties, respectively,
were tellers for the ‘Aye’ side. Although Members from a Jewish background also largely supported the motion, many pointed out that that was because of its phrasing rather than because of their support for the cause in general (HC Debate 1999-00, 734). To reflect on that contradiction, Even Harris, Liberal Democrat MP from a Jewish background, voted in both ‘Aye’ and ‘No’ lobbies, as formal abstention is not allowed according to the House of Commons procedure.

Although the evidence on the parliamentary voting on assisted suicide and euthanasia is limited, it supports the argument that Catholic MPs regardless of their party identification take a ‘pro-life’ approach to this issue, and conversely, vote against any change of the existing regulations in euthanasia and assisted dying. The voting of Jewish parliamentarians on these issues, by contrast, varies along the party lines, whereby Labour and Lib Dems tend to take a ‘pro-choice’ approach compared to Conservative Jewish politicians. Therefore, the effects from their religious background on voting seem to be mitigated by their ideology and personal views that do not match the traditional religious dogma.

The analysis of voting does not, however, show whether a religious background affects the voting behaviour of MPs from Catholic and Jewish backgrounds on euthanasia, and whether they employ faith-based arguments when discussing this issue in the House of Commons.

**Assisted suicide: Sides of the argument**

The qualitative content analysis of parliamentary debates on ‘Doctor Assisted Dying’, the Medical Treatment (Prevention of Euthanasia) Bill, and the motion on the DPP’s policy in respect of assisting or encouraging suicides tabled by Richard Ottaway on March 27, 2012\(^2\) bridges the gap in the analysis and provides suggestive evidence of links between a religious background and parliamentary voting. It demonstrates that a religious background is a significant predictor of the voting of Catholic MPs, whereas Jewish MPs largely rely on their professional and personal experiences unrelated to their religious background when voting on assisted dying.

MPs from a Catholic background, in particular, spoke in support of the Medical Treatment (Prevention of Euthanasia) Bill employing both legal and moral arguments to resist the change of the current legislation regarding assisted dying (HC Debate 1999-00, 691; HC Debate 1999-00, 696-697). They relied on the opinions of faith leaders on the matter arguing that ‘we are to create a society of light and hope and not one in which people ultimately feel they are a burden... [W]e must proclaim this truth, and the House of Commons should proclaim it—that anybody, however young, unborn,

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\(^2\) The motion was resolved stating that ‘this House welcomes the Director of Public Prosecutions’ Policy to Prosecutors in Respect of Cases of Encouraging or Assisting Suicide, published in February 2010, and encourages further development of specialist palliative care and hospice provision’ (HC Debate 2010-12, 1440).
crippled, hopeless, diseased or idiotic, has as much right to life as anybody else, and all life is precious because the external human body is simply a mirror of the soul’ (HC Debate 2010-12, 1402-1403; HC Debate 1999-00a, 618), and in the Catholic catechism stating that ‘[h]uman life must be respected because it is sacred… [and] involves the creative action of God and it remains forever in a special relationship with the Creator, who is its sole end’ (HC Debate 2010-12, 1438).

Thus, they opposed the idea of doctors ‘playing God’ (e.g., HC Debate 1999-00a, 624) and referred to the motions on assisted dying and the DPP’s policy as ‘Trojan horse’ motions that are aiming to eventually legalise euthanasia. Allowing ‘a back-door method of euthanasia by withdrawing food and fluid’, for instance, could lead to ‘changing a principled stance on euthanasia or the law on euthanasia is that once we draw a new line, it can be redrawn time and time again. It may at first be a case of people in a coma, but it will not finish there’, which concerns the Catholic organisations and other faith communities (HC Debate 1999-00, 719).

When making an argument regarding – and often in support of – euthanasia, MPs from Jewish backgrounds rarely referred to faith-related arguments. Rather, they made an argument informed by personal and practical experience. For instance, whilst debating the Medical Treatment (Prevention of Euthanasia) Bill on 28 January and 14 April 2000, Dr Evan Harris declared an interest as a member of the British Medical Association medical ethics committee and a former hospital doctor, and therefore, commented on the content of the bill as a person who ‘[has] been involved in the care of critically ill patients in hospital not competent to give their consent or approval to decisions taken in their best interests by the clinical team’ (HC Debate 1999-00a, 655).

On the other hand, some – predominantly Conservative – MPs from a Jewish background, cautioned the House referring to the cases of people who lost their trust in doctors because ‘the general respect for trying hard to save life [the family’s father in that case] had been undermined by the introduction of euthanasia’ (HC Debate 1999-00, 706), and referred to the Holocaust as an example of ‘how the move to assisted dying has led to something much worse’ when ‘the gas chambers were moved from the hospitals where they had been used for euthanasia to the death camps of Auschwitz and Treblinka’ (HC Debate 2010-12, 1426).

By and large, Jewish MPs’ voting and contributions to debates on euthanasia has painted them as ‘pro-choice’ parliamentarians, as opposed to the positions of the faith community leaders who compared it to ‘playing roulette with human life’ (Sacks 2010; also, Glover 1990; Levy 2007). Labour and especially Liberal Democrats, including the Jewish Members, embraced a liberal approach to the issues of life and death. In fact, the support for the legalisation of euthanasia among the three Liberal Democrats made Dr Julian Lewis wonder whether ‘being Liberal Democrats makes
them believe in euthanasia, or that believing in euthanasia makes them Liberal Democrats’, which mischievously reflected on the libertarian views of the party (HC Debate 1999-00, 728).

Although Dr Evan Harris was born into Judaism (HC Debate 1999-00, 742), he vocally disagreed with the views of traditional religion, reflected in a letter by Cardinal Winning, who called the new BMA guidelines ‘sinister and worrying’, suggesting that scapegoating the BMA was ill-targeted (HC Debate 1999-00, 736-737). He, then, argued with the position of the Chief Rabbi:

On death with dignity, he [Chief Rabbi] is quoted in the House of Commons Library briefing as saying: "Ultimately, the test of our humanity is our ability to face our fate and that of those close to us with courage, humility and dedication; not to hasten death because dying has become burdensome." I disagree. If dying is burdensome, doctors should not be forced to make that death drawn out. I understand the view of the Chief Rabbi, but I do not believe that it is the general view of Jewish people that we should all cope with death, however burdensome, and that there should be no defence against it being prolonged unnecessarily. Heads of religions do not necessarily speak for all the people who subscribe to their religions.

By contrast, Conservative MPs from both Catholic and Jewish backgrounds did not align with those from the Lib Dems and Labour on euthanasia. Furthermore, Conservative Catholic MPs spoke against the change of the legislation regarding assisted dying on two of three votes and MPs from both religious backgrounds frequently spoke against such change during the debates as suggested by the interventions from Dr Julian Lewis, Edward Leigh, Jacob Rees-Mogg and Robert Halfon (HC Debate 1997-98; HC Debate 1999-00a; HC Debate 2010-12).

Overall, the analysis suggests that although Jewish parliamentarians have employed faith-based arguments in the parliamentary debates on euthanasia, compared to Catholic MPs, there are some important differences between the political parties. These differences capture and explain part of the effect from a religious background in the attitudes towards assisted dying expressed in voting and contributions to debates made by Jewish parliamentarians. Catholic MPs, on the other hand, are unanimously opposed to euthanasia regardless of their parliamentary party, which suggests that although both Catholicism and Judaism are equally critical of assisted suicide in any form, this belief is manifested in the behaviour of politicians from these backgrounds differently.

**Conclusion**

Although the analysis of parliamentary voting and debates on assisted dying is conducted on a limited data, it speaks to the arguments put forward by previous studies (Minkenberg 2003;
Cowley and Stuart 2010). It suggests that Catholic MPs regardless of their party identification are unanimously opposed to euthanasia, whereby they resist its legalisation in principle and consistently object to any motions that might eventually lead to that. The importance of their Catholic religious background for decision-making on this issue is supported by the qualitative analysis of their parliamentary contributions showing that they frequently employ faith-related arguments.

The behaviour and the contributions to debates made by Jewish parliamentarians, on the other hand, differ across the parties. Labour and especially Liberal Democrats take a ‘pro-life’ approach to assisted dying. They are more likely to support the change of the current legislation. Hence, the effect from their religious background on voting is mitigated by their ideology and personal views that do not match the traditional religious dogma. Following this logic, it is not surprising that the voting behaviour and contributions to debates made by Conservative Jewish parliamentarians mirrors those made by Conservative Catholic MPs, whereby their party ideology exacerbates the effects from their religious background.

In addition to the party ideology, the differences in the behaviour and attitudes of Catholic and Jewish MPs can be explained drawing upon the structure of their respective faith communities (Warner 2000; Fink 2008). The Catholic Church has a strictly defined, vertical structure that leaves little room for interpretation of the religious norms and principle, or expected behaviour of the member of the faith community. This structure and the unquestionable authority of the Holy See remain stable despite the complex ethnic and socio-economic composition of the community.

In the case of the British Jewry, on the other hand, the diversity in cultural backgrounds and countries of origin was accompanied by differences in religious practice. The religious organisations include the Movement for Reform Judaism and Liberal Judaism, as well as the Orthodox congregations such as the Assembly of Masorti Synagogues and Union of Orthodox Hebrew Congregations. The latter includes more than 400 synagogues and unites 74 per cent of the Jewish population (Graham and Vulkan 2010, 9). However, its conservative position on equality, homosexuality and the issues of life and death, including euthanasia, causes occasional disagreements between the Union and more liberal congregations. This can explain the differences in the behaviour and attitudes of MPs from Jewish backgrounds, why they are more responsive to the influence of political ideology and personal experiences, compared to Catholic MPs who seem to be more affected by their religious background.

References


