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CENTRE FOR MEDICAL ETHICS AND LAW

# **International Symposium**

## **Medically Assisted Dying: Global Trends and Asian Perspectives**

**23 May 2026 (Sat)**  
**9:00 am – 5:00 pm**

**The University of Hong Kong**



**Programme Rundown**  
**Abstracts and Biographies**

### **Supporting Organisations**

Medical Ethics and Humanities Unit (MEHU), The University of Hong Kong  
Professionalism and Ethics Committee, Hong Kong Academy of Medicine

# The Programme

## International Symposium Medically Assisted Dying: Global Trends and Asian Perspectives

23 May (Saturday), 2026  
9:00 – 17:00 (Hong Kong Time)  
Academic Conference Room, 11/F, Cheng Yu Tung Tower, Centennial Campus,  
The University of Hong Kong (HKU)

9:00 – 9:05	<p>Welcome and Introduction</p> <p><b>Prof Gilberto K. K. Leung</b> Director of the School of Clinical Medicine, LKS Faculty of Medicine, Co-Director of the Centre for Medical Ethics and Law, Clinical Professor and Tsang Wing Hing Professor in Clinical Neuroscience, HKU, Hong Kong SAR.</p>
<p><b>Session 1: Medically Assisted Dying Across Worldviews: Secular, Religious, and Ethical Perspectives</b></p> <p><b>Chair:</b> <b>Prof Eric C. Ip</b> Co-Director of the Centre for Medical Ethics and Law and Professor of the Faculty of Law, HKU, Hong Kong SAR.</p>	
9:05 – 9:25	<p>Killing Off the Elderly, Sick, and other Unwanted (Expensive!) Patients</p> <p><b>Prof Mark J. Cherry</b>, The Dr. Patricia A. Hayes Professor in Applied Ethics, Professor and Chair, Department of Philosophy, St. Edward's University, Austin, Texas, United States.</p>
9:25 – 9:45	<p>How Should Autonomy be Understood in Euthanasia Practice and Policy?</p> <p><b>Dr Simon Walker</b>, Senior Lecturer, Department of Bioethics, University of Otago, Dunedin, Otago, New Zealand.</p>
9:45 – 10:05	<p>Interrogating Common Arguments for Physician-Assisted Suicide and Euthanasia</p> <p><b>Prof Ana S. Iltis</b>, Carlson Professor of University Studies, Professor of Philosophy, and Director, Center for Bioethics, Health and Society, Wake Forest University, Winston-Salem, North Carolina, United States.</p>

10:05 – 10:25	<p>Beyond Secular Borders: Islamic Bioethical Perspectives on Euthanasia in Global Discourse</p> <p><b>Prof Mohammed Ghaly</b>, Professor of Islam and Biomedical Ethics and Head of the Research Center for Islamic Legislation &amp; Ethics, College of Islamic Studies, Hamad Bin Khalifa University, Doha, Qatar.</p>
10:25 – 10:40	Discussion
10:40 – 10:50	Intermission (Tea Break)
<p><b>Session 2: Medically Assisted Dying: Theoretical, Empirical, and Cross-Cultural Insights</b></p> <p><b>Chair:</b>  <b>Prof Gilberto K. K. Leung</b>  Director of the School of Clinical Medicine, LKS Faculty of Medicine, Co-Director of the Centre for Medical Ethics and Law, Clinical Professor and Tsang Wing Hing Professor in Clinical Neuroscience, HKU, Hong Kong SAR.</p>	
10:50 – 11:10	<p>Is Medically Assisted Death a “Good Death”? From Global to Regioglobal Bioethics</p> <p><b>Prof Ruiping Fan</b>, Chair Professor of Philosophy, Department of Public and International Affairs, City University of Hong Kong, Hong Kong SAR.</p>
11:10 – 11:30	<p>Physician-Assisted Suicide: A Reconstruction of an Ethical Perspective from Zhuangzi’s Daoism</p> <p><b>Prof Ellen Y. Zhang</b>, Professor and Head, Department of Philosophy and Religious Studies, University of Macau, Macau SAR.</p>
11:30 – 11:50	<p>End-of-Life Autonomy in Taiwan: Public Attitudes Toward Physician-Assisted Dying</p> <p><b>Prof Duan-Rung Chen</b>, Institute of Health Behaviors and Community Sciences, College of Public Health, National Taiwan University, Taiwan.</p>
11:50 – 12:10	<p>A Confucian Middle-Way Perspective on Medically Assisted Suicide</p> <p><b>Prof Jue Wang</b>, Professor of Philosophy, Xi’an Jiaotong University, Xi’an, Shaanxi, Mainland China.</p>
12:10 – 12:25	Discussion
12:25 – 14:00	Lunch (for invitees only)

**Session 3: Medically Assisted Dying in Europe and Beyond: Case Studies from Belgium, Australia, and the UK**

**Chair:**

**Prof Carl Hildebrand**

Assistant Professor, Medical Ethics and Humanities Unit, School of Clinical Medicine, HKU, Hong Kong SAR.

14:00 – 14:20	<p>In(ter)dependence: the Relational Turn in End-of-Life Ethics</p> <p><b>Prof Chris Gastmans</b>, Full Professor of Medical Ethics and Director of the Centre for Biomedical Ethics and Law, Faculty of Medicine, KU Leuven, Leuven, Belgium.</p>
14:20 – 14:40	<p>Structural and Ethical Obstacles to Assisted Dying Reform in the UK</p> <p><b>Ms Daisy Cheung</b>, Lecturer of Medical Law and Ethics, Edinburgh Law School, University of Edinburgh, Edinburgh, United Kingdom.</p>
14:40 – 15:00	<p>Voluntary Assisted Dying Law Reform and Regulation: Australia and Beyond</p> <p><b>Prof Ben White</b>, Professor of End-of-Life Law and Regulation and an Australian Research Council Future Fellow, School of Law, Queensland University of Technology, Brisbane, Queensland, Australia.</p>
15:00 – 15:15	<p>Discussion</p>
15:15 – 15:25	<p>Intermission (Tea Break)</p>

**Session 4: Medically Assisted Dying: Comparative Insights, Potentials, and Local Challenges**

**Chair:**

**Prof Gilberto K. K. Leung**

Director of the School of Clinical Medicine, LKS Faculty of Medicine,  
Co-Director of the Centre for Medical Ethics and Law, Clinical Professor and Tsang Wing Hing Professor in Clinical Neuroscience, HKU, Hong Kong SAR.

15:25 - 15:45	<p>Defining Autonomy in a Family-Centric Culture: The Case of Advance Care Planning and Advance Medical Directives in Hong Kong</p> <p><b>Prof Emmanuel H. L. Cheung</b>, Clinical Assistant Professor of Practice, Critical Care Medicine Unit and Medical Ethics and Humanities Unit (joint appointment), School of Clinical Medicine, HKU, Hong Kong SAR.</p>
15:45 - 16:05	<p>Medically Assisted Dying: Comparative Ethical Insights and Reflections</p> <p><b>Dr Md Sanwar Siraj</b>, Postdoctoral Fellow, Centre for Medical Ethics and Law &amp; Medical Ethics and Humanities Unit, HKU, Hong Kong SAR.</p>
16:05 - 16:15	Discussion
16:15 – 17:00	<p><b>Roundtable Discussion</b></p> <p><b>Chairs: Prof Carl Hildebrand, Prof Eric C. Ip, Prof Gilberto K. K. Leung</b></p> <p><b>Prof Duan-Rung Chen, Prof Mark J. Cherry, Prof Emmanuel H. L. Cheung, Prof Ruiping Fan, Prof Chris Gastmans, Prof Mohammed Ghaly, Prof Ana S. Iltis, Dr Md Sanwar Siraj, Dr Simon Walker, Prof Jue Wang, Prof Ben White and Prof Ellen Y. Zhang</b></p>
After session 4 ends	Dinner (invitees only)

# Abstracts and Biographies

## Session 1

### Presentation Title

### Killing Off the Elderly, Sick, and other Unwanted (Expensive!) Patients

#### Abstract

Is it wrong for physicians intentionally to kill patients if those individuals consent to be killed? What about physicians helping patients to kill themselves? In the Western world, the answer to such questions seems to be increasingly negative. For much of secular bioethics active voluntary euthanasia and physician-assisted suicide no longer raises important concerns beyond ensuring that the patient has in some vague sense consented. Advocates urge that such practices ought to be appreciated as in the patient's best interests because they are thereby able to control the manner and timing of their deaths. Instead of working to alleviate physical pain or reaching out in love to ameliorate their emotional or psychological anxiety, depression, and despair, family members, friends, and physicians are simply to help patients die. In some jurisdictions, eligible patients are not even required to be terminally ill, and rather than significant physical pain often the reason cited is the loss of the ability to engage in what the individual found to be meaningful activities. This presentation explores how the significance of taking human life has been deeply blunted, if not fully lost. Death has become just another event subject to human mastery. Yet, as I argue, properly to appreciate the implications of authorising euthanasia and physician assisted suicide, we must assess whether such practices corrupt physicians and other healthcare workers into the practice of killing patients under the guise of doing good. The long-term impact on medicine in the Western world as it continues to accept intentionally ending the lives of patients as part of its professional mores will be significant.

#### Speaker

#### **Mark J. Cherry**

The Dr. Patricia A. Hayes Professor in Applied Ethics, Professor and Chair, Department of Philosophy, St. Edward's University, Austin, Texas, United States



#### Biography

Mark J. Cherry is the Dr. Patricia A. Hayes Professor in Applied Ethics and Professor of Philosophy at St. Edward's University, Austin, Texas. His research compasses ethics and bioethics, as well as social and political philosophy. In addition to numerous articles, book chapters and other publications, he is author of *Bioethics After God: Morality, Culture and Medicine* (University of Notre Dame Press, 2024); *Sex, Family, and the Culture Wars* (Routledge, 2016); and *Kidney for Sale by Owner: Human Organs, Transplantation, and the Market* (Georgetown University Press, 2005/2015). He is Editor of the *Journal of Medicine and Philosophy* (Oxford University Press); Senior Editor of *Christian Bioethics* (Oxford University Press); Editor-in-Chief of *HealthCare Ethics Committee Forum* (Springer); Co-editor of the book series *The Annals of Bioethics* (Routledge) and Editor of the book series *Philosophical Studies in Contemporary Culture* (Springer).

## Session 1

### Presentation Title

#### How Should Autonomy be Understood in Euthanasia Practice and Policy?

#### Abstract

Respect for autonomy has long been cited as a primary reason to allow euthanasia. Taken in isolation, this reason is in tension with the widely held intuition that access to euthanasia should only be available under certain conditions, and that society should act to prevent suicide. In this presentation I discuss what this tension implies about the nature of autonomy. It reflects, I suggest, a recognition that when a person is considering a life ending decision, they are typically struggling with physical or psychological adversity and or existential questions, and are seeking support or guidance. As such, their decision-making is highly responsive to the meaning that others attribute to their circumstances. This does not fit with the conception of autonomy as the self-determined exercise of certain cognitive capacities, enabled by the absence of unwanted interference. Rather, it indicates that what is commonly described as autonomy is a person striving to retain their agency, and that their capacity to do this is socially and discursively mediated. Understood this way, the question is not whether to respect autonomy, but rather how the reasons grounding a potential decision should be met or accommodated, in the context of other personal, professional and societal commitments.

#### Speaker

#### **Simon Walker**

Senior Lecturer, Department of Bioethics, University of Otago, Dunedin, Otago, New Zealand



#### Biography

Simon Walker is a Senior Lecturer at the Department of Bioethics at the University of Otago, where he leads the teaching of ethics and professionalism at several of Otago's health professional programmes and contributes to the Department's undergraduate and postgraduate papers. He has published on a range of bioethical topics, but is primarily interested in ethical issues in end-of-life care, and theories of suffering, autonomy, and the self. He was trained in philosophy at the University of Otago. His MA in Philosophy compared Kantian and Wittgensteinian views of moral theory. After completing this in 2004 he worked in palliative care research, before undertaking a PhD at the University of Otago Bioethics Centre. His PhD thesis considers Eric Cassell's account of suffering from the standpoint of Kantian and Spinozistic conceptions of the self. He is currently the Chair of the Otago Medical School's Professional Practice Domain Committee, and Vice President of the Australasian Association of Bioethics and Health Law.

## Session 1

### Presentation Title

#### Interrogating Common Arguments for Physician-Assisted Suicide and Euthanasia

#### Abstract

I consider three categories of arguments offered to support physician-assisted suicide and/or euthanasia and demonstrate why they fail to show what proponents claim they show. First are arguments that invoke the right and interest patients have in controlling the time and manner of their death and avoiding pain and suffering. In doing so, proponents often appeal to the obligation of physicians to relieve pain and suffering and to show compassion. Second are arguments that are based on justice. Proponents argue that the right of patients to refuse life-sustaining interventions confers on such patients a right to die/to control their deaths, or to avoid prolonged pain or suffering. All people should be able to exercise this right, including those who do not have the option to bring about their deaths simply by refusing treatment. This right to control one's death/avoid pain and suffering should be extended to other patients via physician-assisted suicide and/or euthanasia. Finally, many supporters of physician-assisted suicide and/or euthanasia hold that these practices can be offered safely in society through careful regulation and by restricting access to specific types of patients such that the state is not justified in prohibiting these practices altogether in the name of protecting its citizens. Notably, proponents disagree amongst themselves about who should be eligible and under which circumstances.

#### Speaker

##### **Ana S. Iltis**

Carlson Professor of University Studies, Professor of Philosophy, and Director, Center for Bioethics, Health and Society, Wake Forest University, Winston-Salem, North Carolina, United States



#### Biography

Ana S. Iltis, Ph.D. is the Carlson Professor of University Studies, Professor of Philosophy, and Director, Center for Bioethics, Health and Society at Wake Forest University. She holds an appointment in the Department of Social Sciences and Health Policy at Wake Forest School of Medicine. She is a past President of the American Society for Bioethics and Humanities, a Fellow of the Hastings Center, and a Non-Resident Fellow in the Baker Institute for Public Policy at Rice University. Dr. Iltis is Founding Co-Editor of *Narrative Inquiry in Bioethics* (Johns Hopkins University Press), Associate Editor of the *Journal of Medicine and Philosophy* (Oxford University Press), and co-editor of the *Annals of Bioethics* book series (Routledge). Iltis' scholarly focus is primarily on the ethical conduct of human research, and she has published extensively on ethics and policy issues regarding organ transplantation and emerging biotechnologies, as well as a wide range of other topics. She earned her Ph.D. in Philosophy at Rice University and completed bioethics training at Baylor College of Medicine in Houston, Texas.

## Session 1

### Presentation Title

#### **Beyond Secular Borders: Islamic Bioethical Perspectives on Euthanasia in Global Discourse**

#### Abstract

Contemporary discourse on euthanasia and physician-assisted suicide remains overwhelmingly shaped by Western secular bioethics, privileging principles such as individual autonomy within a framework that systematically brackets religious and metaphysical considerations. This presentation argues that a genuinely global discourse on end-of-life ethics cannot be adequately constructed on this foundation alone, insofar as it fails to capture the profound moral architectures that continue to orient the lives of billions worldwide. Drawing on the Islamic moral tradition, this talk first delineates the ethically consequential distinction between active and passive interventions at the end of life. Whereas contemporary Muslim scholars are virtually unanimous in categorically prohibiting active euthanasia, grounded in the sanctity of human life, divine sovereignty, and the ontological limits of human agency, the tradition exhibits substantive internal diversity regarding certain forms of passive euthanasia, wherein conditional permissibility is frequently negotiated. The presentation subsequently engages dialectically with the arguments prevalent in secular bioethics, not to foreclose that discourse, but to demonstrate that religiously grounded positions can be articulated in a discursively accessible manner that transcends epistemic and theological boundaries. The central thesis is that authentic global dialogue on euthanasia demands a multi-traditional conversation that runs in two directions simultaneously: secular frameworks must open themselves to religious moral reasoning, and religious traditions, in turn, must advance arguments of sufficient rational transparency to engage interlocutors beyond their own confessional communities.

#### Speaker

#### **Mohammed Ghaly**

Professor of Islam and Biomedical Ethics and Head of the Research Center for Islamic Legislation & Ethics (CILE), College of Islamic Studies, Hamad Bin Khalifa University, Doha, Qatar



#### Biography

Mohammed Ghaly is a Professor of Islam and Biomedical Ethics, and Head of the Research Center for Islamic Legislation & Ethics (CILE), College of Islamic Studies, Hamad Bin Khalifa University, Qatar. He has a B.A. in Islamic Studies from Al-Azhar University (Egypt) and an M.A. and PhD in the same specialization from Leiden University (the Netherlands). Between 2007 and 2013, Ghaly was a faculty member at Leiden University.

Ghaly is the founding editor-in-chief of the Scopus-indexed *Journal of Islamic Ethics* (published by Brill). In September 2019, he assumed the role of founding Program Coordinator of the newly established M.A. in Applied Islamic Ethics at Hamad Bin Khalifa University. He also served as the Conference Chair of the 17th World Congress of Bioethics (WCB), the first WCB edition to be held in the Arab world and the entire Middle East.

Islamic Ethics and its intersection with biomedical sciences and artificial intelligence (AI) represent Ghaly's main research interests. He is the author of *Islam and Disability: Perspectives in Theology and Jurisprudence* (Routledge, 2010), and *Islamic Ethics and Incidental Findings: Genomic Morality Beyond the Secular Paradigm* (Springer-Nature, 2024). He is the editor of the volumes *Islamic Perspectives on the Principles of Biomedical Ethics* (Imperial College & World Scientific, 2016), *Islamic Ethics and the Genome Question* (Brill, 2019), and *End-of-Life Care, Dying*

*and Death in the Islamic Moral Tradition* (Brill, 2022). Ghaly is also the editor of various thematic issues, the single author of more than forty peer-reviewed publications, and an editorial board member of several academic journals. Additionally, Ghaly is the Lead Principal Investigator (LPI) and research consultant on a number of funded research projects, the most recent of which is on “Transforming Islamic Studies in the Age of Generative Artificial Intelligence (AI)”. His publications can be accessed via <https://cilecenter.academia.edu/MohammedGhaly>.

## Session 2

### Presentation Title

### Is Medically Assisted Death a “Good Death”? From Global to Regioglobal Bioethics

#### Abstract

This presentation is based on a recent paper I coauthored with Sanwar Siraj.

Contemporary global bioethical debates on medically assisted death (MAD) exemplify a form of “thick” ethical universalism. Each side—whether in support of or against the legalisation of MAD—argues that the opposing view is not only ethically wrong but also should be barred from shaping laws and policies in their respective regions, even if the opposing view aligns with the dominant cultural ethics there. In essence, both sides believe not only that their perspective on MAD should be universally adopted, but they also assert that the contrary view should not be tolerated.

We advocate for a form of “thin” ethical universalism, which I refer to as “regioglobal bioethics.” Within this framework, while each side may believe that its own view on MAD is universally correct, they should, for practical reasons, recognise that people in other jurisdictions have the legitimate authority to create laws and policies based on their dominant ethical perspectives, either accepting or rejecting MAD legalisation. Additionally, minorities within each jurisdiction should have the fundamental rights to critique the prevailing view and, if necessary, to leave the region. However, they do not possess the right to use force to change the laws.

Underlying the incompatible views on MAD are several widely cited criteria and considerations for what constitutes a good death, including Physical Comfort, Family Involvement, Spiritual or Religious Fulfillment, Autonomy and Control, and Legal and Bureaucratic Clarity. However, distinct cultures interpret and prioritise these dimensions differently, assigning varying weights to each when considering a good death. These nuances can explain and justify why different cultures support or reject the legalisation of MAD.

We first illustrate the Islamic and Confucian perspectives on a good death in relation to the five dimensions, explaining why contemporary regions influenced by Islam and Confucianism oppose the legalisation of MAD. We then present the liberal perspective on a good death and discuss why liberal regions tend to support MAD legalisation. Following this, we argue for a regioglobal bioethics of MAD: while each side—Muslim, Confucian, or liberal—may contend that its viewpoint is universally correct and should be applied universally, they should also tolerate the differing views held by other cultures and recognise the latter’s juridical authority in their respective jurisdictions.

#### Speaker

#### **Ruiping Fan**

Chair Professor of Philosophy, Department of Public and International Affairs, City University of Hong Kong, Hong Kong SAR



## Biography

Ruiping Fan (范瑞平) earned his doctorate in philosophy from Rice University in Houston. He is currently Chair Professor of Philosophy in the Department of Public and International Affairs at the City University of Hong Kong. His research focuses on bioethics and comparative philosophy, drawing inspiration from Confucian cultural resources. He is a founding editor of the *International Journal of Chinese & Comparative Philosophy of Medicine*, a bilingual journal based in Hong Kong. Additionally, he serves as an Associate Editor for the *Journal of Medicine & Philosophy* in the United States and the *Chinese Medical Ethics* journal in mainland China. With over 200 published journal articles and book chapters to his name, he has made significant contributions to the field, with approximately 130 publications in English and 110 in Chinese. Among his notable works are *Reconstructionist Confucianism: Rethinking Morality after the West* (2010, English), *Contemporary Confucian Bioethics* (2011, Chinese), and *Contemporary Medicine and Confucian Thought* (2024, Chinese). He has also edited or co-edited 15 volumes, exploring topics related to technology, ethics, and Confucian studies. Noteworthy recent publications include *Sex Robots: Social Impact and the Future of Human Relations* (2021), *Incentives in Organ Donation: A Cross-Cultural Study among Beijing, Chicago, Tehran, and Hong Kong* (2023), *An East-West Dialogue on Values for Good Governance: Learning from Each Other* (2024), *Chinese Ethical and Legal Perspectives on Automated Vehicles* (2025), and *Artificial Intelligence and the Future of Human Relations: Eastern and Western Perspectives* (2025).

Ruiping Fan was ranked among the top 2% of most-cited scientists according to the metrics compiled by Stanford University in 2022.

## Session 2

### Presentation Title

#### Physician-Assisted Suicide: A Reconstruction of an Ethical Perspective from Zhuangzi's Daoism

#### Abstract

Both physician-assisted suicide (PAS) and voluntary active euthanasia (VAE) are controversial topics in bio-medical ethics today since both involves an action that goes beyond the idea of “letting die.” Those who support PAS or VAE tend to engage in concepts such as dignified death, individual autonomy, and the right to self-determination to argue for the ethical and legal validity of euthanasia. In this presentation, I will use Zhuangzi's Daoist philosophy as a theoretical framework to discuss the ethical issues implied by PAS. I will argue that even though Zhuangzi sees death as inevitable within the larger context of changes and transformations in nature, he would regard artificially terminating the life of a human to be an unethical act. From a Daoist perspective, PAS (even taken as compassionate euthanasia) is fundamentally incompatible with the physician's role as a health provider rather than a death facilitator. Meanwhile, there exists a real possibility of a slippery slope argument if self-determined death is legitimised, especially in a social condition in which healthcare remains a problem. It is my contention that we should pay more attention to end-of-life hospice and palliative care to provide appropriate comfort care (including pain control) and emotional support to cope with a difficult dying process.

#### Speaker

#### **Ellen Y. Zhang**

Professor and Head, Department of Philosophy and Religious Studies,  
University of Macau, Macau SAR



#### Biography

Ellen Y. Zhang holds a PhD in Philosophy of Religion from Rice University (United States). She is Professor and Head in the Department of Philosophy and Religious Studies at the University of Macau. She is also a Research Fellow at the Centre for Applied Ethics (Hong Kong Baptist University) and the Institute of Advanced Studies of Humanities and Social Sciences (University of Macau). Her research areas include philosophy of religion, Chinese philosophy (Daoism and Buddhism) and comparative studies in philosophy and ethics. She is the co-editor-in-chief for the *International Journal of Chinese & Comparative Philosophy of Medicine* (Hong Kong) and member of the editorial board for the *Journal of Religious Ethics* (United States), the *South China Quarterly* (Macau), and *Chinese Medical Ethics* (People's Republic of China). Her recent publications include “(Re)animating the ancestors: Digital personality emulations, ancestor veneration and ethics” (2025), “AI Chatbots and Their Impacts on Social Relationship: A Daoist Perspective” (2025), “The Buddha-Bot: Can an Embodied Spiritual Machine Lead Us Towards Enlightenment?” (2025), “War and Peace according to Huang-Lao Philosophy” (2024), “Covid-19, State Interference, and Confucian Paternalism” (2023), “The ‘Greening’ of Daoism: Potential and Limits” (2023), and “The Ethics of Hospitality: Tracing the Confucian Other” (2023).

## Session 2

### Presentation Title

#### End-of-Life Autonomy in Taiwan: Public Attitudes Toward Physician-Assisted Dying

#### Abstract

This presentation examines public attitudes toward physician-assisted dying (PAD) in Taiwan and considers what these views reveal about evolving understandings of end-of-life autonomy within Taiwan's shifting legal, cultural, and ethical context. It situates the discussion within Taiwan's Patient Autonomy Right Act, which protects patients' rights to refuse life-sustaining treatment and to allow a natural death under specified conditions, but does not permit active medical assistance in dying. Drawing on a 2022 nationwide survey of 3,992 adults, the presentation analyses support for PAD across three scenarios: terminal illness, unbearable non-terminal physical pain, and severe cognitive impairment. The findings indicate consistently high levels of support, with the strongest approval expressed in cases of terminal illness, followed by non-terminal unbearable pain and severe cognitive impairment. Support is more likely among younger respondents, men, those without religious affiliation, formal caregivers, and individuals with higher levels of advance care planning preparedness, whereas health professionals and people with greater awareness of the Patient Autonomy Right Act are associated with lower levels of support. Overall, the findings suggest a growing emphasis on individual autonomy in Taiwan's end-of-life debates, while also highlighting the continuing interplay of legal constraints, professional ethics, and cultural values in shaping public opinion.

#### Speaker

#### Duan-Rung Chen

Professor, Institute of Health Behaviors and Community Sciences,  
College of Public Health, National Taiwan University, Taiwan



#### Biography

Duan-Rung Chen's research examines the community-level consequences of health inequality, the social patterning of obesity, the use of GIS in health research, social network dynamics, aging, and end-of-life care. With training in medical sociology, she has developed substantial expertise in quantitative and spatial methods for analysing how social and structural factors shape health outcomes.

Her recent scholarship falls into two interrelated areas. First, her research on aging and community resilience investigates how older adults experience loneliness, make medical decisions, and pursue community inclusion, with particular attention to dementia-friendly and socially supportive environments. Second, her work on end-of-life care considers the sociological and ethical dimensions of care preferences, surrogate decision-making, and cross-national differences in readiness for advance care planning. Across these areas, Dr. Chen's research integrates sociological, public health, and ethical perspectives to demonstrate how structural inequality and social relationships shape health and well-being.

## Session 2

### Presentation Title

#### A Confucian Middle-Way Perspective on Medically Assisted Suicide

#### Abstract

It is generally believed that medically assisted suicide (MAS) should either be universally legalized or rejected in every region of the world. Under this polarised framework, MAS is often treated as an all-or-nothing ethical issue, with little room for nuanced, culturally grounded reflection as if a single moral standard could adequately address diverse social, cultural, and religious contexts. This paper refrains from such ethical extremism and instead argues for a middle-way perspective based on Confucian ethics. Beginning with two radically opposing views on the widely debated case of a Chinese patient seeking MAS in Switzerland, this paper highlights the urgency of developing a culture-specific ethical framework for societies to address contentious bioethical issues. We contend that decisions on these matters should be decentralised to individual societies, taking into account their unique mainstream moral cultures, such as the liberal moral culture in Western Europe or the Confucian moral culture in East Asia. This Middle Way is better understood as a non-ideal, context-sensitive pragmatism rather than moral relativism: While Confucian ideals are universally applicable, practical policies must be attuned to local social and moral realities. For Confucians, tolerance should be practiced without forsaking what Confucianism recognises as genuinely good or right.

#### Speaker

#### Jue Wang

Professor of Philosophy, Xi'an Jiaotong University, Xi'an, Shaanxi, Mainland China



#### Biography

Jue Wang is Professor of Philosophy at Xi'an Jiaotong University, China. She earned her PhD in Philosophy from Peking University and completed postdoctoral research at the University of Notre Dame. Her scholarly output spans numerous peer-reviewed articles in the fields of bioethics, technology ethics, and comparative philosophy. Her current research focuses on the ethics of aging and intergenerational justice. She also serves on the Editorial Advisory Board of *International Journal of Chinese Comparative Philosophy of Medicine*.

### Session 3

#### Presentation Title

#### **In(ter)dependence: the Relational Turn in End-of-Life Ethics**

#### Abstract

This lecture offers a socio-historical analysis of the principle of respect for autonomy in end-of-life care, with particular attention to euthanasia practices in Belgium. It traces how autonomy has become a central ethical cornerstone of end-of-life practices, highlighting the dominance of an individualistic interpretation that has shaped professional norms and societal expectations. While this framework has strengthened patient rights, it has also generated moral tensions, including experiences of moral distress among caregivers and family members involved in end-of-life decisions.

In response, the lecture proposes a shift toward a relational understanding of autonomy, emphasising interdependence, dialogue, and shared responsibility. This perspective is reflected in care practices such as advance care planning and shared decision-making, which aim to better integrate the perspectives of patients, families, and healthcare professionals. The adoption of relational approaches is argued to foster moral resilience across stakeholders.

Drawing on nearly 25 years of experience with euthanasia in Belgium, the lecture concludes by identifying key societal and institutional challenges, underscoring the need for nuanced regulatory frameworks that balance individual rights with relational and contextual dimensions of end-of-life care.

#### Speaker

#### **Chris Gastmans**

Full Professor of Medical Ethics and Director of the Centre for Biomedical Ethics and Law, Faculty of Medicine, KU Leuven, Leuven, Belgium



#### Biography

Chris Gastmans is Full Professor of Medical Ethics and Director of the Centre for Biomedical Ethics and Law at the Faculty of Medicine, KU Leuven, Belgium. He is also a member of the Belgian Advisory Committee on Bioethics and has played a leading role in European bioethics networks, including the European Association of Centres for Biomedical Ethics (EACME).

Gastmans is internationally recognised for his interdisciplinary approach, combining philosophical, theological, and empirical research to examine ethical practices in clinical contexts. He teaches and publishes on the ethical dimensions of care for older adults, end-of-life care, and the role of technology in healthcare. His scholarship is characterized by a sustained commitment to dignity-enhancing, relational approaches to care for older adults and at the end of life.

He has (co-)authored numerous publications in leading international journals. He co-edited the volume *Euthanasia and Assisted Suicide: Lessons from Belgium* (Cambridge University Press, 2018), in which an international and interdisciplinary panel of experts offers a critical analysis of euthanasia practices in Belgium.

### Session 3

#### Presentation Title

#### Structural and Ethical Obstacles to Assisted Dying Reform in the UK

#### Abstract

Recent years have seen a flurry of activity in the sphere of assisted dying legislation in the UK. The Terminally Ill Adults (End of Life) Bill in England and Wales, introduced in October 2024, and the Assisted Dying for Terminally Ill Adults (Scotland) Bill, introduced in March 2024, represent recent efforts to legalise assisted dying following years of high-profile court cases. While initial optimism existed regarding the passage of this legislation, the rejection of the Scottish bill and the stagnation of the Westminster bill suggest that statutory reform is unlikely to materialise in the UK in the near future. This presentation explores some of these developments, as well as some of the underlying procedural, socioeconomic, and safeguarding factors that may have contributed to the current legislative landscape.

#### Speaker

#### Daisy Cheung

Lecturer of Medical Law and Ethics, Edinburgh Law School, University of Edinburgh, Edinburgh, United Kingdom



#### Biography

Daisy Cheung is a Lecturer of Medical Law and Ethics at Edinburgh Law School. Prior to joining the University of Edinburgh, she was Deputy Director and Research Fellow of the Centre for Medical Ethics and Law (CMEL) at the University of Hong Kong. She currently remains a Research Fellow of CMEL, and is a member of the Mental Health Law Committee of the Law Society of Hong Kong. She has published on a number of different topics in medical law and ethics, but her research interests focus primarily on mental health and capacity law and ethics, which has led to her interest in advance medical directives. As part of an RGC-funded project, she co-edited a collection on *Advance Directives Across Asia: A Comparative Socio-legal Analysis* (Cambridge University Press 2023), the first systematic, comparative study of advance medical directives in Asia.

### Session 3

#### Presentation Title

#### Voluntary Assisted Dying Law Reform and Regulation: Australia and Beyond

#### Abstract

Internationally, countries are grappling with the complex question whether voluntary assisted dying (VAD) should be permitted, and if so, in what form. This presentation considers these questions drawing both on Australian and international experience.

On the question of law reform, research into the international experience shows that key factors determining whether or not this occurs include the quality of the reform process, how evidence about the operation of VAD systems is weighed, and whether there is an environment conducive to law reform. The latter factor includes considerations such as a country's cultural values, history and social norms which shape how different ethical values such as autonomy, dignity and protection of the vulnerable are understood and weighed. This presentation examines the Australian path to reform in the context of these wider international debates.

For those jurisdictions deciding to permit VAD, attention turns to regulatory design. The second part of the presentation draws on a 4-year comparative study of Australia, Canada and Belgium to explore how these three countries regulate VAD differently. Again, design of law and regulation is heavily influenced by local cultural, historical and societal considerations leading to quite different VAD systems. The presentation concludes with some observations about comparative studies of VAD.

#### Speaker

#### Ben White

Professor of End-of-Life Law and Regulation and an Australian Research Council Future Fellow, School of Law, Queensland University of Technology, Brisbane, Queensland, Australia



#### Biography

Distinguished Professor Ben White is Professor of End-of-Life Law and Regulation and an Australian Research Council Future Fellow in the School of Law, Queensland University of Technology. He was a foundation Director of the Australian Centre for Health Law Research and still co-leads its End-of-Life Research Program. Ben has been researching end-of-life law, policy and practice for 25 years and has produced over 250 publications. He has been part of interdisciplinary teams awarded over \$A66 million in the field of end-of-life decision-making, including from the Australian Research Council, the National Health and Medical Research Council, Commonwealth and State governments and philanthropic organisations. Ben's research currently focuses on voluntary assisted dying (VAD). Current projects include an Australian Research Council Future Fellowship on "Optimal Regulation of Voluntary Assisted Dying", a national study of VAD in practice, and an exploratory study of dementia and VAD. He (with colleagues) developed the mandatory training in Victoria, Western Australia and Queensland for clinicians providing VAD.

## Session 4

### Presentation Title

### **Defining Autonomy in a Family-Centric Culture: The Case of Advance Care Planning and Advance Medical Directives in Hong Kong**

#### Abstract

While the global discourse on physician-assisted suicide and euthanasia frequently centres on active interventions driven by individual autonomy, Advance Care Planning (ACP) and Advance Medical Directives (AMDs) offer a distinct yet conceptually related framework for end-of-life decision-making. In Hong Kong, the ongoing legislative evolution of AMDs and the systemic promotion of ACP provide vital insights into how autonomy is defined and operationalised within a society deeply rooted in traditional Chinese values. In this context, Western notions of strict individual self-determination inevitably intersect with family-centric decision-making and the cultural imperative of filial piety, necessitating a paradigm shift towards relational autonomy. This presentation explores the ethical and practical trajectory of ACP and AMDs in Hong Kong, highlighting the delicate balance required to respect personal wishes while appropriately accommodating familial involvement. By examining the moral and sociocultural challenges encountered in legislating the refusal of life-sustaining treatment, this analysis yields valuable lessons for the broader international debate on medical assistance in dying, ultimately informing the development of culturally sensitive legislative frameworks for future end-of-life care.

#### Speaker

#### **Emmanuel H. L. Cheung**

Clinical Assistant Professor of Practice, Critical Care Medicine Unit and Medical Ethics and Humanities Unit (joint appointment), School of Clinical Medicine, HKU, Hong Kong SAR



#### Biography

Emmanuel H. L. Cheung is an intensive care physician with a special interest in medical ethics and end-of-life care. His current appointments include Clinical Assistant Professor of Practice at HKUMed—jointly appointed by the Critical Care Medicine Unit and the Medical Ethics and Humanities Unit—as well as Research Fellow at the HKU Centre for Medical Ethics and Law, and Honorary Specialist in Intensive Care at Queen Mary Hospital. Following the completion of his specialist training in intensive care medicine, he obtained a Master of Laws (LLM) in Medical Law and Ethics from the University of Edinburgh. A passionate advocate for a humanistic approach to clinical care, Dr Cheung focuses his research on post-intensive care syndrome and geriatric critical care. He is also dedicated to advancing medical ethics and humanities education in Hong Kong, pioneering the use of student co-design and participatory theatre approaches in professionalism and clinical ethics training for medical undergraduates.

## Session 4

### Presentation Title

#### Medically Assisted Dying: Comparative Ethical Insights and Reflections

#### Abstract

This presentation is primarily based on a recent paper I co-authored with Ruiping Fan, published in the *Journal of Medicine and Philosophy*.

This presentation offers comparative ethical insights into medically assisted dying across liberal, Islamic, and Buddhist cultures and its implications for other traditions. It first outlines global jurisdictions that have legalised medically assisted dying, focusing on individual autonomy and self-determination. While such practices may be ethically justified in liberal societies, it is important to consider what is morally appropriate in other cultural contexts, such as Islamic and Buddhist regions. The presentation argues that decisions about legalising medically assisted dying should be guided by each region's prevailing moral culture. In Islamic contexts, legalising such practices would conflict with established moral convictions and bioethical principles that emphasise the sanctity and preservation of life, the prohibition of intentional killing, and the importance of palliative care. In Buddhist traditions, core teachings such as impermanence, compassion, karma, rebirth, and the acceptance of suffering shape ethical attitudes toward dying. Although Buddhism places strong emphasis on relieving suffering, intentionally ending life through medical intervention is generally inconsistent with its teachings on non-harm, moral conduct, and the natural process of death. Overlooking these cultural and religious factors risks ignoring significant ethical implications and may lead to the adoption of assisted dying in regions where cultural and religious values shape health law, public policy, and ethics. The presentation concludes that contemporary Islamic and Buddhist regions should not legalise medically assisted dying. The conclusion holds similarity for Confucian regions in East Asia, where filial piety, family responsibility, and social rituals play crucial roles in end-of-life ethics, but not necessarily for other regions of the world, such as liberal ones.

#### Speaker

##### **Sanwar Siraj**

Postdoctoral Fellow, Centre for Medical Ethics and Law & Medical Ethics and Humanities Unit, HKU, Hong Kong SAR



#### Biography

Sanwar Siraj is currently a Post-Doctoral Fellow at the Centre for Medical Ethics and Law, and is hosted by the Medical Ethics and Humanities Unit at the University of Hong Kong. He obtained his PhD in medical law and ethics from City University of Hong Kong, with a particular focus on Muslim religious culture and living organ donation, and completed postdoctoral training at the University of Zurich. His expertise includes empirical bioethics, Islamic ethics, and normative analysis. Dr Siraj has published in leading bioethics journals such as the *Journal of Medicine and Philosophy*; *Philosophy, Ethics, and Humanities in Medicine*; *Journal of Bioethical Inquiry*; *BMC Medical Ethics*; *Developing World Bioethics*; *Theoretical Medicine and Bioethics*; *Asian Bioethics Review*; *HEC Forum*; and *Bangladesh Journal of Bioethics*. His current scholarship focuses on the ethics and law of end-of-life care, including physician-assisted suicide and euthanasia. He is also committed to teaching health law and ethics to, among others, medical students and healthcare professionals.

## About the Organisers

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The Centre for Medical Ethics and Law (CMEL) develops new ideas and solutions in response to the big ethical, legal and policy questions of medicine and health. CMEL is the first cross-faculty interdisciplinary institution of its kind in the region. It was founded in 2012 by the LKS Faculty of Medicine and Faculty of Law at The University of Hong Kong as a joint inheritor of their vibrant intellectual traditions dating back to 1887 and 1969 respectively.

Today, CMEL brings together bioethicists, academic lawyers, medical scientists, and other scholars to conduct cutting edge bioethical and legal research and contribute to policy development in flagship areas like digital health and emergent technologies, mental health and capacity, and population and global health.

Research, teaching and knowledge exchange—CMEL’s core initiatives—aim to ensure that developments in biomedicine and public health will be underpinned by ethical and legal considerations.

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