

Under the Needle: Ergonomic Issues with Lethal Injection Protocols

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ABSTRACT

The institution of capital punishment represents one of the most contentious issues affecting societies today; and while the practice is only implemented in 58 countries, the controversy affects the world at large as over 60% of the human population lives in nations that condone the death penalty (Hali, 2015). In the United States, people who support capital punishment believe the practice to be an effective crime deterrent for potential criminals and therefore a prospective protective measure for law abiding citizens. Moreover, advocates defend their position by forwarding the argument that executions are ‘humane’; that use of lethal injection ensures that such sentences are carried out as quickly and painlessly as possible.

Opponents, however, object for legal (i.e., violation of the 8th Amendment that precludes cruel and unusual punishment) and humanitarian (i.e., alleviation of undue pain and suffering) reasons. Detractors, moreover, decry the government as hypocritical for killing individuals found guilty of murder (or, in rare cases, treason). As a result of these and other factors, support for capital punishment policy is by no means overwhelming; and as a reflection of this state of affairs, the Supreme Court did not rule unanimously in its decision to uphold the death penalty (*Baze v. Rees*, 2008). The majority (7-2) ruled that the practice is only constitutional if enacted correctly. Sadly, however, what little research that has been conducted on lethal injection has shown that the procedure is rarely carried out correctly, as it is plagued by several significant ergonomic issues including: the inaccessibility of data, lack of medical oversight, insufficient personnel training, and improper administration practices. In addition to examining these flaws, I discuss the moral role of the ergonomist in addressing these shortcomings, and how any such ‘improvements’ to the system can have ramifications for similar euthanasia practices (i.e., animal population control and assisted suicide).

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