MEDICALLY ASSISTED SUICIDE

There are currently at least five states that allow medically assisted suicide. Several other states are considering similar legislation, California among them.

The purpose of this presentation is to offer comments and observations not on the specifics of various laws, but simply on the concept of medically assisted suicide in general.

As Catholic Christians we are called to reject this concept for several reason, but in this presentation I talk about it from the secular as well as a Catholic perspective, deferring to the secular discussion first.

At that level, this debate is really about a segment of our society wanting to extend the circumstances under which one person, or group of people, might be permitted to take the life of another. In our country, indeed globally, the idea that there are circumstances under which one may take the life of another with impunity are many and seldom disputed. Among the more common are self defense, abortion, and capital punishment.

So this debate is not about something that society finds fundamentally wrong or even abhorrent. We are merely debating a new set of circumstances to make it acceptable.

Because the basic principle seems already established, current discussion seem to focus on definitional issues. We have broached this subject using various terminology: Some of these include:

The Right to Die
Medically Assisted Suicide
Mercy Killing
Euthanasia

A big part of any debate is first to define terms in such a way as to favor your particular position.

We’ve seen this clearly play out in the debate on abortion, as both sides continue to shift terminology to make their side sound more benign, perhaps even “noble.”

For example, proponents of this specific issue dislike the term “medically assisted suicide.” Despite its factual accuracy, they feel it is too “harsh.”

Suicide, in general, carries not only negative connotations, but deeply tragic connotations, and whether justified or not, proponents think the term is inappropriate. Thus, they seek to rid the discussion of what they consider “loaded” terminology.

Opponents, on the other hand, prefer terms that more graphically and, in their mind, bluntly express the reality of what’s being contemplated.
Sadly, these definitional debates sometimes distract us from the real issue.

Generally, I define the issue as this: It begins with a person who has a serious medical condition, the outcome of which is not in doubt. Death is inevitable, usually within a fairly short period of time. Further, death will come only after a period of extremely serious pain that cannot be mitigated through normal or even extraordinary, pain control therapies. Herewith, that patient should be allowed to have a doctor prescribe and administer drugs which will quickly and presumably painlessly end the patient’s life. This will also, it is argued, relieve the psychological and emotional pain of the patients’ relatives and friends.

I would welcome discussion of a different definition, but even though I might acquiesce to it, I find the problem to be the same.

No matter how tightly we define the issue, it is highly subjective and relative, that is, the above definition as well as others will mean very different things to different people under different circumstances. It will mean something different to the patient, to the doctor, and to the patients’ relatives and friends, and to society in general.

And herein lies the problem. We are a society that accepts “relativism” as a basis for it law and development of its ethics. I leave it, at this point, because it would take me prematurely into the Catholic perspective, which I discuss later.

Other elements in the secular debate include defining things like:
- Quality of Life
- Death with Dignity
- Compassionate Care
- Extraordinary Financial Burden
- Risk - Benefit Analysis
- Inordinate Commitment of Medical Resources

I have, in my own mind somewhat rigid definitions of these terms, but I suspect these would not embraced by proponents of medically assisted suicide, if for no other reason, they lead to direct opposite conclusion regarding the matter. Until we can find common ground here, everything is reduced to “relativism.”

With that then, I segue to a Catholic perspective, which among other things, rejects relativism in determining the moral correctness of how we live our lives.

Sadly, I’m afraid, Catholic theology, and even Christian theology has an ever shrinking influence on our political milieu, the arena in which this matter will be decided.
While there are many elements of our Catholic faith that apply, for brevity’s sake and the purpose of this work I focus on just two:

The role that suffering plays in our redemption
The basic tenet of all Catholic morality, Human Dignity

Death, of course, is inevitable. Even then there are circumstance where death is completely instantaneous, therefore presumably painless.

Suffering is equally inevitable. While the case of a sudden instantaneous death, may presumably not cause the patient/victim suffering, this element cannot exclude the suffering of relatives and friends. Even the secular side of this debate includes this element, but it is especially true in the Catholic side of the matter.

Suffering should not be equated with punishment. While the purpose of punishment is to inflict suffering of some sort, suffering, on the other hand, is not punishment per se. That is to say, all of us suffer at one time or another without regard to innocence or guilt.

Neither is suffering something that God inflicts. He does not desire us to suffer. That’s contrary to the image of a God whose love for us is beyond all imagination.

God does permit suffering. We are created body and soul. We cannot define what either of these terms means without an admission that suffering is part of that essence.

Nor can we define these essences without a sense of connectivity to all other bodies and souls.

These characteristics are part of what it means to be human. While suffering is something that all things experience, in humans it becomes unique because of our free will as to how we respond to it. (Free will is discussed further under Catholic morality).

Jesus calls us to be “perfect” as our Heavenly Father is perfect. In this sense, “perfection” is not flawlessness, but rather means completeness. Therefore, to be fully human, suffering is necessary.

We respond to our own suffering as well as the suffering of others. In both cases, as Catholics the response should be “other-oriented” as opposed to self-oriented.

We don’t want to suffer, and though there was at one time a practice of inflicting suffering on oneself as atonement, this practice is not acceptable. It is born out of the sense alluded to above, equating suffering as punishment.

As for the suffering of others, we are called to compassion. This means reasonable efforts to mitigate suffering, but not eliminate it, especially not at all cost.
Consider a few scripture passages:

In Paul’s Second Letter to the Corinthians, Chapter 12 we read:

*Therefore, that I might not become too elated, a thorn in the flesh was given to me, an angel of Satan, to beat me, to keep me from being too elated. Three times I begged the Lord about this, that it might leave me, but he said to me, “My grace is sufficient for you, for power is made perfect in weakness.” I will rather boast most gladly of my weaknesses, in order that the power of Christ may dwell with me.*

This addresses one’s own suffering. There is no harm in wishing it weren’t so, or praying for relief, but the ultimate message here is acceptance, perhaps more importantly, surrender to God’s will as well as ACCEPTANCE of His Grace and acknowledgement of its power.

A second passage deals with our response to the suffering of others:

Also from Paul’s Second Letter to the Corinthians, Chapter 1, we read:

*Blessed be the God and Father of our Lord Jesus Christ, the Father of compassion and God of all encouragement, who encourages us in our every affliction, so that we may be able to encourage those who are in any affliction with the encouragement with which we ourselves are encouraged by God. For as Christ’s sufferings overflow to us, so through Christ does our encouragement also overflow. If we are afflicted, it is for your encouragement and salvation; if we are encouraged, it is for your encouragement, which enables you to endure the same sufferings that we suffer. Our hope for you is firm, for we know that as you share in the sufferings, you also share in the encouragement.*

We learn through our own suffering, and the suffering of Jesus and from His suffering, how to support others.

I often dwell on our Good Friday vignette as to the suffering that occurred there.

As Jesus hung on the cross, there was excruciating physical pain in every fiber of His body. Yet, that was not enough, for as He hung there naked, battered, and dying, He had to gaze on the suffering of His mother, who quite possibly was in even greater pain than He, despite the lack of physical brutality on her own body.
Thus, His psychological, mental, emotional, and spiritual suffering was magnified in seeing her.

Yet, I have no doubt, and it seems paradoxical, perhaps contradictory, that despite the enormity of each of their pain, it was somehow lessened simply by their sharing it with each other.

This is what Catholics are called to, . . . to be present at AND on the Cross.

A third passage pertains to our humanity and God’s call to completeness:

In Paul’s letter to the Colossians, Chapter 1 we read:

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\text{Now I rejoice in my sufferings for your sake, and in my flesh I am filling up what is lacking* in the afflictions of Christ on behalf of his body, which is the church, . . .}
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One might rightly ask “What was lacking in Christ’s suffering?” A Catholic can answer: “Me.”

Part of what made Christ’s suffering so powerful is, not only was He INNOCENT, but it was on our behalf. It doesn’t mean we need not suffer, it means we have to suffer if we are truly The Body of Christ. Unity with God is the ultimate design in God’s plan (See Ephesians, Chapter 1). This cannot occur without suffering.

The final element of suffering is the redemptive nature, the redemptive necessity of suffering. Perhaps this is where we approach the mystery of God’s wisdom. Could we have been redeemed without Jesus’ Incarnation, public ministry, persecution, execution, Resurrection, Ascension? Of course. God’s God.

Are we better off because of all that?

The second element of the Catholic perspective on medically assisted suicide is the foundation of all Catholic morality. This topic takes up an entire curriculum of advanced academic study, something I obviously cannot do here.

Let me make the following brief (I hope) points:

Human dignity stems from our creation by God Himself, His very breath in each and every human being, that is the gift of life, and the gift of free will.

Our Catechism says that any action or will of action that “insults human dignity” equates to sin. (CCC 1849) Medically assisted suicide insults that which God granted by our assuming His role. An act that infringes upon, or prevents another’s exercise of free will is equally insulting.
The second part of Catholic morality is discussed in the Catechism in section 1750 and following. For this work however, consider three elements critical in assessing the morality of a particular act.

1. The act itself as “good” or “evil.” The object chosen.
2. The end in view or the intention of the act.
3. The circumstances under which the act is taken.

A passing assessment of these elements might mistakenly lead us to a sense of relativism, so there is need for great diligence in using them.

The taking of another’s life is always evil. But that doesn’t necessarily mean sinful. There are many circumstances under which our Church would assess the act as evil, but would not impute sin.

The intention can also be tricky. Administering lethal drugs to alleviate suffering could be argued by some to be permissible because the intention is “good” even if the end is death. However, our morality also says, the end never justifies the means (CCC1753). Is the “end” relief of suffering or death? Therefore, alleviating suffering by causing death is not permissible.

The circumstance become highly subjective. I alluded earlier to issues in the secular debate, to wit:

- Quality of Life
- Death with Dignity
- Compassionate Care
- Extraordinary Financial Burden
- Risk - Benefit Analysis
- Inordinate Commitment of Medical Resources

Some of these do pertain to end of life issues even within our Catholic morality, but our Church teaching on these, while complex, are fairly clear. They are less clear in the secular arenas.

Finally, moral arguments often entail a discussion of “the lesser of two evils.” We might suggest considerable discussion whether allowing or prolonging suffering is more or less evil than the taking of a life.

Catholic morality is not easy.

Summary:

As Catholics, it is important we enter into this discussion on both a secular and religious level. I caution, however, that despite the validity of Catholic morality, that factor will receive a less than fair, perhaps even unwelcome hearing in the secular arena. Be prepared for that.
The general trend of current social thinking places the emphasis on scientific and philosophical logic and reason. Both are of unquestionable value in determining the ethics of a community. Without, however, the element of the “transcendent,” that is, theological logic and reason, the most likely outcome is relativism itself.

Every society that has ever utilized a system of relative ethics has ultimately failed.

Our challenge is to continue to insist that theological logic and reason never be ignored as we struggle our way through the ages.

We may be further challenged by having to live in a society where the latter element is ignored. What then, does that mean to our individual salvation?