

Respect LIFE



(Photo by Jim Whitmer)

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Euthanasia Creeps Into Society

By RICHARD DOERFLINGER

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In January 1986 the Hemlock Society published a model bill to legalize active euthanasia. This Humane and Dignified Death Act would require physicians to obey a terminally ill patient's request for "any medical procedure that will swiftly, painlessly and humanely terminate the life" of the patient. The group has announced it will press for enactment of this law nationwide, beginning in three states with large elderly populations: Arizona, California and Florida.

Derek Humphry, the society's founder and director, says his organization anticipates opposition from the Catholic Church, and that it is training ministers of various faiths to counter all religious arguments against euthanasia.

This new boldness on the part of euthanasia advocates is the culmination of a decade-long struggle over "death with dignity." An idea once seen almost universally as barbaric now seems to intrigue many Americans as a new and daring solution to individual and social problems.

This trend seems likely to continue as social and economic pressures to limit life-sustaining measures for the elderly become more intense. The continued aging of the American population, due in part to the falling birthrate and the trend toward the one- or two-child family, has raised alarm over the viability of Social Security and other support systems.

The ability of modern medicine to prolong life, often at great expense, has been blamed for much of the modern escalation of health-care costs, prompting Gov. Richard Lamm's remark that elderly people have a "duty to die"

and make way for the next generation.

In this social context, voluntary euthanasia presents itself as the easy way out in resolving a wide range of individual and social problems — in much the same way abortion was touted in the 1960s and 1970s as a solution to problems such as child abuse and poverty.

In some ways euthanasia is more difficult to argue against than abortion. We say abortion is wrong because it is the direct killing of a defenseless human being. Few forms of euthanasia are as clearly violent as abortion, and those methods that hasten death by withdrawing basic necessities do not have the appearance of a lethal act at all, at least on the surface. The victim may seem willing rather than defenseless. And the very fact that he or she is a human being and legal person is used by some to ground a fundamental "right to choose the time and manner of one's death" — a right sometimes based on the "right of privacy" used to justify abortion.

The Catholic Church's rejection of euthanasia is absolute and unyielding. The Second Vatican Council condemned "euthanasia or willful suicide" as crimes against humanity and the Vatican's 1980 Declaration on Euthanasia confirmed and elaborated this teaching.

The "Declaration" explains that human life is a gift from God over which we humans have stewardship but not absolute dominion. Since life is the basis and necessary condition for all other human goods, its destruction is an especially grievous violation of the moral law — whether the victim consents or not.

Particularly important is the

Declaration's definition of euthanasia as "an action or an omission which of itself or by intention causes death, in order that all suffering may in this way be eliminated" (emphasis added).

What is important morally is that one intends the person's death — either as an end in itself, or as a means to another end (such as ending the person's suffering).

This does not mean, however, that it is always wrong to withhold or withdraw treatment to prolong life. When treatment seems useless or unduly burdensome, the Church refers to it as "extraordinary" and recognizes that a patient may choose to accept or refuse it.

Since 1976 more than 35 states have enacted "living will" laws. Most of these do not present a direct conflict with the Church's teaching because they claim to authorize withdrawal of life-sustaining treatment only when it is futile. But these laws are open to objection. For example, they express a bias toward authorizing withdrawal of such treatment. Also, it is far from clear that a "living will" by itself can provide the kind of informed consent appropriate to life-and-death medical decisions.

Public support for legalizing euthanasia is likely to increase unless defenders of the inherent sanctity of human life prepare themselves to participate fully in the moral and social debate. Now is the time to act.

Richard Doerflinger is assistant director of the National Conference of Catholic Bishops' Office for Pro-Life Activities.