Opinion

NCR Voices



In an Oct. 26, 2015, file photo, supporters of legal physician-assisted suicide rally outside the New Mexico Supreme Court in Santa Fe. (AP/Russell Contreras, File)



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The New York Times ran a story earlier this week by Lola Fadulu about Lynda Bluestein, a Connecticut woman with late-stage fallopian tube cancer who wishes to end her life. Connecticut does not permit physician-assisted suicide, so Bluestein sought to procure help in Vermont, where it is legal. Vermont, however, has a residency requirement, so Bluestein has sued Vermont, seeking to have the residency requirement deemed unconstitutional.

"Thanksgiving is typically a joyous time for the Bluestein family. Their Bridgeport, Conn., home is filled with laughter, music and even a cooking competition," the article began. "But last fall, the mood was somber. 'I think next year will be the year that Grandma will die,' Lynda Bluestein, 75, recalled telling her husband, children and grandchildren as they gathered in the living room."

You need to have a heart of stone not to be moved by Bluestein's story. And that is the problem.

Like all good journalists, Fadulu interviewed people on both sides of the contentious issue.

"It's just unfair, and it doesn't really make sense to restrict some sort of medical practice just based on ZIP code or residency," said Amitai Heller from the pro-assisted-suicide group Compassion & Choices.

"Rather than trying to address the needs of vulnerable people, we offer them the possibility of killing themselves," said Brian Kane, a senior director of ethics with the Catholic Health Association.

Obviously, my sympathies are with Kane's argument precisely because it is what the church teaches and it coheres with the value of human life and dignity that we Christians believe is integral to our understanding of the faith.

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The voices of experts, however, can't compete with the emotional punch of Bluestein's comments. She recounts her own mother's final days when her mom was so fatigued from chemotherapy, she did not even want to see Bluestein and her brother. "We had no time with her at the end of her life," Bluestein said. "I don't want my children, who are now 45 and 47 years old, to have those memories of me at the very end."

This emphasis on personal, deeply emotional testimony always privileges the libertarian argument in an ethical debate. No one wants to be considered heartless, and the reporter did not interview others who might be impacted negatively by medically assisted suicide.

Surely, there are instances where an elderly person is pressured into the decision to end their life by a child who is too selfish to want to shoulder any additional burden of caring for a sick parent, but the selfish child certainly isn't going to admit his or her motives on the record and I doubt the very ill and vulnerable elder would care to share that story either.

It was good that the reporter interviewed a disability rights activist, who said of assisted suicide: "There's just no place for it, especially when we have such a long history of racial disparities in health care and disability discrimination in health care."

But this was from an activist, not from someone who had contemplated and wrestled with the decision. If anything is clear about American culture today, it is that an argument rooted in the common good or the demands of social justice has a hard time beating a libertarian argument rooted in personal choice.

This same disparity between highly emotional testimony from women contemplating an abortion and the testimony of experts stalks journalistic coverage of that issue as well. The person most affected by the abortion decision, the unborn child, is never interviewed. The pro-life argument can be made by a parent or an activist or an expert, but that argument will be of a different character from the testimony of someone who has just faced a crisis pregnancy. Trying to refute someone's experience with an argument is almost impossible in a society that is anti-philosophic like American society.

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Journalism is in the midst of a significant debate about how, and even whether, it can embrace the standard of objectivity. "Increasingly now, journalists — particularly a rising generation — are repudiating the standard to which we routinely, and resolutely, hold others," wrote Martin Baron, former executive editor of The Washington Post in a recent essay. "These critics of objectivity among journalism professionals, encouraged and enabled by many in the academic world, are convinced that journalism has failed on multiple fronts and that objectivity is at the root of the problem."

Baron, invoking the great journalist Walter Lippmann, defends objectivity as an essential goal of journalism, not because journalists can ever truly be free from bias, but because we can't. Quoting from the book *The Elements of Journalism*, Baron rightly notes: "*The method* is objective, not the journalist."

Baron does not address the problem I raise in this essay, the tendency to advance a sectarian cause by failing to appreciate the imbalance between a subject telling a story and an expert articulating a principle. I wish he had! The way we Americans consciously and unconsciously favor individual choice over societal claims is so deep, it is easy to ignore, especially when a person who seems most immediately affected by a given decision stakes a claim and the negative consequences of the decision are remote and mediate, but arguably just as consequential.

That is precisely the problem with coverage of assisted suicide. The only solution will be for journalists to recognize the imbalance between a first-person account and all other testimony, acknowledge that imbalance to the reader as well, and search diligently to learn about those who are affected adversely, albeit more remotely, by things like assisted suicide.

The rest of us, too, need to recognize the way certain cultural dispositions like pragmatism color our worldviews. And, as Catholics, to make sure we are forming our conscience in light of our faith with its very different biases and perspectives.