Opinion

NCR Voices



Kathy Ware, right, gives remarks about assisted suicide during a press conference Jan. 25 at the Minnesota Capitol ahead of a state House committee hearing about proposed legislation to legalize physician-assisted suicide in Minnesota. Next to her is her son, Kylen, who has quadriplegic cerebral palsy, epilepsy and autism. (OSV News/The Catholic Spirit/Dave Hrbacek)



by Michael Sean Winters

View Author Profile

Follow on Twitter at @michaelswinters

Join the Conversation

Send your thoughts to *Letters to the Editor*. Learn more

April 24, 2024

Share on BlueskyShare on FacebookShare on TwitterEmail to a friendPrint

Most of the controversy surrounding the Dicastery for the Doctrine of the Faith's recent document on human dignity, *Dignitas Infinita*, has focused on its repudiation of gender ideology. Another section of the document deals with an even more pervasive threat to human dignity as the church understands it, euthanasia and assisted suicide.

The document argues that proponents of euthanasia and assisted suicide use a "mistaken understanding of human dignity to turn the concept of dignity against life itself."

It notes that "laws permitting euthanasia or assisted suicide are sometimes called 'death with dignity acts.' With this, there is a widespread notion that euthanasia or assisted suicide is somehow consistent with respect for the dignity of the human person."

Against this misconception, the dicastery reminds us: "Suffering does not cause the sick to lose their dignity, which is intrinsically and inalienably their own. Instead, suffering can become an opportunity to strengthen the bonds of mutual belonging and gain greater awareness of the precious value of each person to the whole human family."

You would think Christians who worship a crucified God wouldn't need the reminder, but we do.

Advertisement

Then, in one of the finest sentences in the document, we read: "Life is a right, not death, which must be welcomed, not administered."

Currently, assisted suicide is legal in 10 states: Maine, Vermont, New Jersey, Colorado, New Mexico, Montana, Washington, Oregon, California and Hawaii. Another 12 are considering it, according to this story in the Associated Press.

That story highlights one of the principal hurdles facing those of us who believe assisted suicide is wrong: People in desperate circumstances say they want to be allowed to end their own lives in this manner, and who are we to stop them? It should be their choice, right? In America, if you succeed in framing your objective around the theme of choice, you almost always win.

It is easy for us as Catholics to sniff out the libertarian moral assumptions that undergird this position. Just as we reject similar libertarian ideas when it comes to laissez-faire economics, we must be consistent and reject them here.

There is no escaping moral analysis that looks beyond what any particular person desires to the potential for abuse for others if a particular policy is adopted. We call that honoring the common good.

The common good also and always demands room for the exercise of conscience by individuals in a society, but within limits. A just society needs to enact laws that keep people from harming themselves and others, especially when such harm increases the likelihood that still more people will be harmed.

Related: Canada's euthanasia laws are frightening example of 'throwaway culture'

Besides, a conscience that thinks killing people who are deemed useless, even by themselves, is a badly formed conscience. Such utilitarianism formed the justification for eugenics in the first part of the 20th century, and we know how that experiment turned out.

Boston Cardinal Sean O'Malley wrote an excellent column on assisted suicide in The Boston Globe. The cardinal focuses especially on the threat to persons with disabilities and the elderly. The disability community has long been a leading opponent of these horrible laws.

O'Malley notes, "An individual who is physically disabled, depressed, or who fears being a burden to their family may be subject to undue influence or coercion by others to consume the deadly drug mixture. This is particularly troubling if there are financial benefits to be gained as a result."

Not every family is a June and Ward Cleaver family. It is easy to see how a vicious cycle of resentment by other family members can feed depression and the fear of being a burden.

> 'Life is a right, not death, which must be welcomed, not administered.'
>
> —Cardinal Sean O'Malley
>
> Tweet this

Such scenarios place members of the medical profession, both doctors and nurses, in an untenable position, especially the latter. A relationship of absolute trust needs to prevail between a doctor, a nurse and the patient, yet both doctors and nurses must deal with family members, too. The mere prospect that a family might try to persuade either the nurse or the doctor to use their influence with the dying person can erode that trust.

It is for such these reasons that the cardinal notes, "The death that results from withholding or withdrawing of life-sustaining treatment has always been separated by a bright line from active measures to cause death. Assisted suicide proponents seek to blur this line."

Some will dismiss the Vatican's and the cardinal's warnings because they invoke a slippery slope argument. But some slopes really are slippery. If you have been to Auschwitz or any of the death camps, and seen what a highly civilized culture convinced itself it could do to the infirm, you know what lies at the bottom of that slope.

The halfway point down the slope may not be as horrific as the bottom, but it is a horror nonetheless. A culture perfectly capable of providing palliative care instead manipulates people into this ethically frightening landscape of assisted suicide. The church is right to resist this manipulation with all her might, to defend the dignity of the disabled and the elderly and the infirm.