CATHOLIC CONFERENCE OPPOSES PHYSICIAN ASSISTED SUICIDE

Arguing that physician assisted suicide involves the taking of human life and weakens rather than strengthens the bonds of human solidarity, the Wisconsin Catholic Conference testified in opposition to a proposal to permit physician assisted suicide in Wisconsin.

Senate Bill 151 would require that an attending physician satisfy a patient’s request for medication to end his or her life so long as that patient meets certain statutory requirements and submits a written request for the medication.

Associate Director for Respect Life and Social Concerns, Barbara Sella, presented the WCC’s testimony at a January 23rd hearing before the Senate Committee on Public Health, Senior Issues, Long Term Care and Privacy.

“Assisted suicide raises questions that are profoundly personal and heart wrenching. Yet, it is in these very moments that we are most in need of principles to guide our choices and to define the limits of our actions,” Sella testified.

“The first of these principles is that human life is sacred, a gift with which we are endowed by God. Hence, it is inalienable,” she argued. “This is not merely a ‘Catholic’ proposition, nor a uniquely Christian one. It is, rather, a ‘self-evident’ proposition, recognized as such by the Founders and reaffirmed by Lincoln at Gettysburg when he dedicated the nation to a new birth of freedom, but a freedom under God’s providence.”

“The second principle is that human life is social. We humans, by our nature, are bound to each other. Any decision that violates basic rights or that devalues life affects other types of behavior and other choices. Such decisions are never a purely private matter or choice.”

Sella’s testimony also refuted the argument by supporters of assisted suicide that what is at stake is freedom of choice.

“Human freedom and personal choice are not absolute values or rights.... The law places some limits on freedom and choice in the interest of protecting human life and dignity.”

“If our law does not recognize a person’s choice to become a prostitute or a slave, how can it permit her to use the argument of freedom in order to be killed? Personal freedom and choice cannot trump the inalienable right to life.”
As an example of where this type of legislation can lead, Sella cited the widespread use of euthanasia in the Netherlands. “Doctors have assisted not just the terminally ill to die, but those who are completely symptom free, those who are severely depressed, and those who have not voluntarily consented to ending their lives. Furthermore, since the publication of the Netherlands’ Groningen Protocol in 2004, the Dutch permit doctors to euthanize newborns born with serious disabilities, like severe spina bifida.”

“It does not follow, however, that a terminally ill patient is obligated to accept or employ every means of treatment just to stay alive,” she clarified. “Catholic moral teaching makes a clear distinction between ordinary and extraordinary means of care, between accepting death and choosing to cause it.

“Catholic medical ethics permits the use of powerful painkillers even when they may have the unintended side effect of shortening a patient’s life.”

Sella concluded her testimony by stressing that the proper response to those who are nearing death is love and solidarity. “As individuals and as a society, we can and must comfort dying persons and reassure them that we value their continued presence. We can and must tell them that their dependency does not diminish their inherent dignity. We can and must affirm that their lives still matter.”

The Committee took no action on the bill after the hearing.

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