

Assembly Bill ABx2-15: The End of Life Option Act
Consideration From A Catholic Perspective
by Reverend Joseph M. Benedict

Assembly Bill ABx2-15, The End of Life Option Act, was passed by California State Senate and has been submitted to Governor Brown for approval or veto. This legislation has received increasing support and greater prominence following the assisted suicide of Brittany Maynard. Brittany Maynard was a 29 year old Bay Area resident who was diagnosed with terminal brain cancer. She moved to Oregon which allows physician assisted and ended her life to “escape her suffering.”

Her decision to end her life and the pending legislation awaiting Governor Brown’s signature must be reconsidered from our Catholic tradition as well as within the context of human life and dignity. We believe that God is the source of all life. The creation stories of Genesis poignantly tell of God’s creative action; we read that women and men are created in God’s own image and likeness. Therefore, human dignity is not a consequence of cultural development or the result of legislative action. Human dignity flows from God’s creative act. We hold firmly to the belief that God is the author of all life. Directly acting against innocent human life is against God’s will. To unjustly take the life of another human being, or assist a person in taking their own life, is wrong.

Support for this bill has been presented as a compassionate response to the suffering of Britany Maynard and other terminally ill patients. Presenting ABx2-15 as a compassionate response, however, is misdirected. This bill undermines the value of the human person, does not fully respect end of life care that must be provided persons in their final days, and places vulnerable persons at greater risk.

The Church has endeavored throughout our history to alleviate human suffering and ease physical pain. Religious communities and lay women and men throughout our history have heroically dedicated themselves to the care of the sick and dying. Caring for the sick and suffering is an integral element of Christian discipleship, an expression of the very ministry of

Christ. Such action extolls the value of the human person and incarnates God's desire to heal. Compassionate accompaniment in illness is a Christian response to human suffering and pain.

This accompaniment certainly mandates adequate medical interventions to manage pain; it also assures human presence to ease fear and relieve anxiety. Too often adequate palliative care is absent in the final days of life. According to a 1992 palliative care manual of the Washington Medical Association, 90-99% of all pain of terminally ill patients can be controlled. Furthermore, palliative care has advanced greatly in the past twenty years.

Any person who is suffering from terminal illness remains a member of a human community. Any limitation because of illness and pain must not result in isolation or abandonment. They remain part of our families, parishes, and wider society. Our presence at the end of their life honors the relationships they have forged throughout their life.

Finally, assisted suicide places vulnerable persons and populations at greater risk. The experience in Oregon and Washington State indicate that this is a critical concern. Dr. Leon Kaas, M.D., a leading medical ethicist indicated in a recent article "I Will Give No Deadly Drug," that many who feel they are a burden to their family and friends, as well as those who are anxious and depressed, are most likely to feel pressure to commit assisted suicide. Accompanying terminally ill patients in their final days can alleviate the perception that they are a burden; it likewise affords the dying the opportunity to express their concerns and honor the relationships that have enriched their lives.

This pending legislation is not a compassionate response to human pain and suffering. It undermines human dignity and limits the freedom of vulnerable persons to face their final days without subtle pressure to end their lives. True compassion demands ample care of the sick and dying, adequate medical intervention to relieve pain, and loving human accompaniment.