



Physician-Assisted Suicide

Introduction

The Catholic Health Association of the United States (CHA) opposes public policy that advances the legalization of physician-assisted suicide. This position is grounded in our respect for the value of human life, our long tradition of caring for persons who are most vulnerable, our commitment to the provision of high-quality palliative care, and our concern for the integrity of medical, nursing, and allied health professionals. We promote public policy that will improve and expand access to and delivery of high-quality palliative and end-of-life care services.

Palliative care anticipates the physical, psychosocial, and spiritual needs of persons living with advanced serious illness and addresses their suffering in all domains.

Our position is grounded in:

- A belief that all individuals are created in the image and likeness of God and, thus, are worthy of our respect and every protection we can provide.
- A belief that a caring community devotes more attention, not less, to members facing the most vulnerable times in their lives. When people are tempted to see their own lives as diminished in value or meaning, they most need the love and assistance of others to assure them of their inherent worth.
- A belief that interdependence is part of the human condition and is not an affront to human dignity. We are called to bear one another's burdens. This attitude allows us to live out our true dignity in solidarity with one another.
- A belief that our efforts are best directed toward providing quality hospice and palliative care services to ensure the most humane, comprehensive and compassionate care for those in the final stages of life.

Clinical, ethical, and moral problems with physician-assisted suicide include:

- Requests for physician-assisted suicide are frequently motivated by concerns about diminishment, becoming a burden to others, or loss of autonomy. Left unaddressed, such concerns can lead one to move too readily and unnecessarily to physician-assisted suicide.
- People living with a serious illness often anticipate a future of unrelieved physical, emotional, social, or spiritual distress. Lack of access to hospice and palliative care can create the false impression that physician-assisted suicide is the only way to avoid suffering at the end of life.
- Proponents of the legalization of physician-assisted suicide refer to it as a private choice, a personal matter of self-determination to be accepted by the rest of society. However,

physician-assisted suicide is not simply a personal matter of self-determination. It is a social act, involving others beyond the patient and requiring government oversight.

- There are limits to personal autonomy, and physician-assisted suicide can legitimately be overridden by other compelling interests, the foremost of which is the preservation of human life.
- Dignity is often cited as a reason to support physician-assisted suicide. In fact, physician-assisted suicide is often referred to as “death with dignity.” But what is dignity? For supporters of physician-assisted suicide, dignity is an individual matter and assisted suicide is a personal choice based on an individual’s evaluation of the quality of their life. In the Catholic tradition, dignity is inherent in all human life as persons created in the image of God. Therefore, dignity is not protected by eliminating the suffering person, but through skilled and compassionate end-of-life care that allows people to approach death without unfounded fear.
- As a human community, the importance of interdependence must be honored and respected, especially when individuals require more personal care and attention at the end of life. This interdependence preserves and protects inherent human dignity.
- Endorsing physician-assisted suicide as public policy may adversely affect and endanger vulnerable populations, including those with historic and systemic lack of access to health care, underlying mental health problems, chronic diseases, physical or intellectual disabilities, the young, and the frail elderly.
- Physician-assisted suicide is incompatible with the ethical traditions of health professionals and their contract with society.
- The resources currently expended on the legalization of physician-assisted suicide should be directed at mitigating concerns about loss of dignity and self-determination that are often associated with the final stages of life.

We promote public policy that supports accessible hospice and palliative care services.

- Hospice and palliative care services are hallmarks of the Catholic health care ministry that address the physical, emotional, social, and spiritual needs of patients to optimize human dignity and comfort during serious illness and at the end of life.
- Hospice and palliative care interdisciplinary teams provide care in a holistic way, extending compassion to the sick and those who suffer, and welcoming them into a community of dignity and respect.
- Hospice and palliative care physicians, nurses, social workers and chaplains address the pain and suffering that may be associated with serious illness to help patients and their loved ones find comfort, peace, hope and meaning in their remaining time together.
- Hospice and palliative care are frequently misunderstood. Public education is critically important regarding the benefits and accessibility of these services. Resources on hospice and palliative care can be found [here](#).

Summary

The Catholic Health Association, informed by our faith and values, advances excellence in hospice and palliative care. We promote a culture in which all persons living with or affected by a serious illness receive compassionate, holistic, and coordinated care starting at the time of diagnosis. We believe in an explicit commitment to accompany others in the face of human suffering. We leverage our expertise and resources to be an influential leader for needed improvements in hospice and palliative care education, research, clinical practice and financing mechanisms. We advocate for the interests and concerns of those we serve and the advancement of high-quality hospice and palliative care for all persons in need.

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