

## **The Moral Issues of our Moment**

### **Reflection 3: Euthanasia and Voluntary Assisted Dying**

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My priestly life makes me no stranger to death. Hardly a week goes by when I don't see someone dying or who has died. As a young monk one of my first responsibilities was nursing the older, sick members of the community through to their death. It was one of the most formative experiences of my life. Then, later, as chaplain at St Vincent's Hospital in Melbourne in the late 90s, I recall in the space of one week alone attending 24 deaths. This experience has inevitably given me a familiarity with death. Yet, one of the things that would strike me - in hospital chaplaincy, particularly - is that those unfamiliar with death would understandably struggle with its natural processes. "Why does my mother have to suffer like this?" they would ask in anguish. Or with the same anguish, they might declare that, "no one should have to suffer like this!" when, in fact, the person they loved was simply going through the natural process of the body shutting down, even quite peacefully.

Ignorance of death can make us fearful of it. Indeed, we have largely removed death from our daily lives often relegating it to the medical context rather than integrating it into our family circle. The overwhelming majority of people now die in hospital. Gone are the days when someone may have died in the same bed in which they were born - which wonderfully was the experience of the father of a friend of mine. Many of us may not have the experience of being with someone dying until well into our own life, if at all. Many of us rarely see death, if at all.

As followers of Jesus, we celebrate life. We celebrate a life that we do not own, but that we have been given, that we have received to nurture and to protect until the One who has given us life withdraws it into its Mystery once again. However, at the same time, we are not expected to prolong life using extraordinary means. There comes a point where we no longer need to resist the forces of diminishment, and when we can let go. There have been a number of instances in which I have worked with people who have come to the faith-filled decision not to pursue a course of treatment for which the benefit seemed futile, and who have decided to surrender their life. These have been moments of remarkable faith and hope. I will never forget one of these people. She was a woman in her late 60s, afflicted by the paralyzing Gillian-Barres syndrome. She had been in intensive care for many months, and all the treatment afforded her was having no effect. She came to the decision not to pursue the treatment, with the expectation that when the life support was withdrawn she would die shortly after. I recall the morning the breathing apparatus was removed. We expected to be with her in prayer as nature took its course. Nature did take its course, but in a way that no one had imagined. From the moment medical treatment ceased, she started to get well. In a most curious way, the treatment had been preventing her body from resisting the disease. Six weeks later the lady walked out of the hospital. The most extraordinary dimension of this experience for me was the paradox that in her very readiness to die, the woman was given back her life.

Without doubt, for some, though, the experience of death can be traumatic, not only psychologically but also physically. This can be one of the most awful experiences to witness. However, with the enormous advances in palliative care such situations today are not common. We recognize that the treatment of pain, especially through opioids such as morphine, can, on occasions, seem to hasten the event of death. There have been times at which I have been present with someone dying when it was clear the next injection of morphine would so suppress their breathing that respiratory function would cease. However, neither the decision to cease extraordinary medical intervention either for ourselves, or for those we love who are incapable of making their own decision, nor the administration of pain relief, even with the inevitable outcome of death, is euthanasia. Euthanasia is the deliberate primary intention of someone to terminate life.

For us baptized into the story of the life of the Resurrection, the termination of life for any reason is abhorrent. It is the fundamental usurpation of an authority not our own, and, therefore of the rightful order

between creature and Creator. How we receive life, nurture life, and protect it demonstrates to us the acknowledgement, or otherwise of this radical relationship that is the ground of all others.

We live in a society, however, where the orientation to the Transcendent no longer exists and the sense of accountability to something other than myself is no longer apparent. In this context, life is not a Mystery to be served but rather a right to be exercised.

I recall a 'Q and A' exchange that highlighted this vividly. A woman from the audience - clearly a very educated and articulate woman - made a passionate appeal for her right to determine when she might die. One did not get the sense that she was currently suffering from a terminal disease, and she did not intimate that she was. It was for the principle of the right to die at the time of her choosing for which she was passionate. Faced with the prospect of a lingering death, requiring the services of many other people, surely, she should have the right to die with dignity? Why should she suffer the indignity of having to be cared for in every respect, to be fed by others, to be toileted by others? The prospect of being so dependent on others was an affront to her dignity. Surely it was her right as an individual to make a choice to preserve her dignity. As an individual, entirely responsible for herself, she should be able to make such a choice with the assistance of others that did not implicate those assisting negatively.

The argument presents so reasonably, so clearly. Yes, surely as mature, responsible individuals we should have such rights, and so avoid the prospect of suffering. Why prolong suffering? Why should anyone suffer, in fact, when the outcome of death is obvious - particularly when the means are there to remove the suffering in a controlled, humane manner? A person is to die in any event. Why not control the time of death to limit the possibility of suffering of the one who is terminally ill, and the suffering of others who will be drawn into the experience as they watch and wait?

However, beneath the argument we hear the premise of the individualism that marks our time in which the self, and nothing other, has become the arbiter of what is right and what is true. However, are we as individual as we think we might be? Are we as wrapped up in individual autonomy as we have been led to think we are? More authentically, we are our relationships, and it is only through our relationships that we have our very life. We discover who we are only in and through our relationships. And where does this radical definition of ourselves as human find its greatest transparency but in the care we exercise with and for one another? When we are prepared to forget ourselves and suffer with another, then we show with the greatest clarity who we truly are. A love that is prepared to enter the suffering of another, a love that is prepared to forget oneself in care of another, and a love that is prepared to receive that care, gives us back the truth of ourselves. It is precisely in that mutuality that a beauty of humanity rises in the midst of the darkness and shines forth to so transform it.

The question of suffering is at the heart of our human experience. How are we to approach the unavoidable reality of suffering in our life? Surely, we are to limit and overcome suffering, not seek it or intensify it? How can we stand by and let someone we love, suffer? Of course, no one wants to see someone suffer, especially someone they love. For those who argue most for the right to die at the time of their own choosing, there is, often, an incredibly sad story of watching someone they love die. It is understandable when we hear them say that they would not want anyone to go through that they experienced - even if the appeal to their personal experience renders it with a legitimacy that is, in fact, entirely subjective though delivered with uncontested authority. When we base our decisions exclusively on our subjective experiences though to what social cohesion are we accountable?

But what demonstrates our humanity is our readiness to enter the suffering of one another. In suffering there is, in fact, a light to be discovered that the darkness cannot extinguish - that, in fact, overwhelms the darkness, transforming it by the exercise of an altogether different logic. This is genuine compassion. Compassion means suffering with. It is a love that holds the suffering of another, that journeys into the suffering of another, a love that is prepared to enter the suffering of another so that their suffering becomes mine. As the Canadian philosopher, Charles Taylor, observes, we have reduced compassion to the therapeutic, to the 'feel-good.' Then, compassion becomes merely a shadow of itself, a justification to limit

the intrusion of the negative, of the painful, in our experience. Compassion is about the restoration to feeling good, rather than about living with questions that are raw and relentless, questions that undo us and recreate us.

Do, we really want a society where the beauty of human compassion has been so hollowed out, and in which our suffering is terminated with the coldness of an isolated decision, and with technological precision? Assisted euthanasia is a failure of humanity, and it is a failure of society itself. It promises a certain redemption in the form of deliverance but it robs us of that which makes us most deeply and fully human which can only be received in the experience of a depth of care for another to the very limits. Neat, clean, controlled, euthanasia short circuits the deepest possibility that lies in what it means to be human – and not only human, but also divine: the mystery of life is disclosed in a self-emptying become a self-giving. For a society to go down the track of assisted euthanasia is for it ultimately to wash its hands clean of the radical responsibility of care by which alone we are humanised, and given our dignity as persons.

Do we want a therapeutic society? Or do we want a loving society? Do we want a technologically determined society? Or do we want a human society? Do we want a society that is altogether neat and controlled? Or do we want a society that retains the full unpredictability and messiness of life itself? Which society reflects to us our truth? Which society makes us more human, not less?