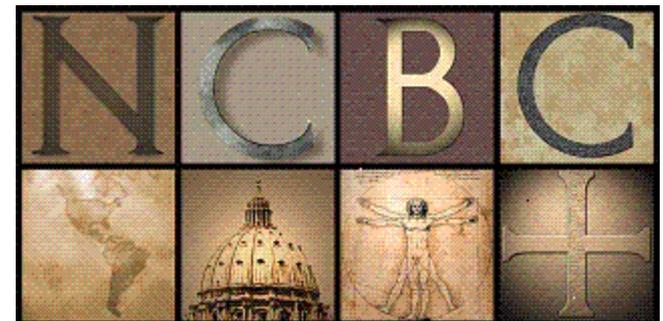


Utilitarianism Impacting Care of Those with Disabilities & Those at Life's End

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2010

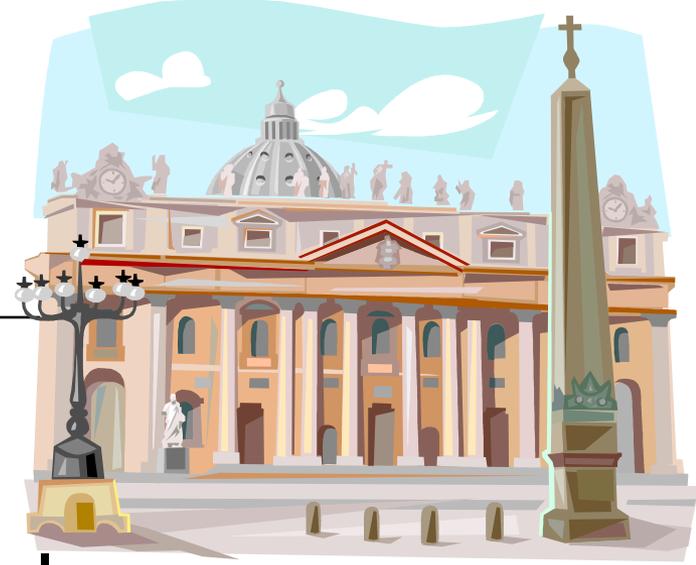


Understanding of Suffering Impacts Public Policy Re: Disabled and Elderly



- Unavoidable element of life
- Punishment for sin
- Avoid suffering (Western culture)
- Diminishes human dignity
- Pain vs. Suffering
- Salvific meaning

“Suffering” *Declaration on Euthanasia* (1980), CDF

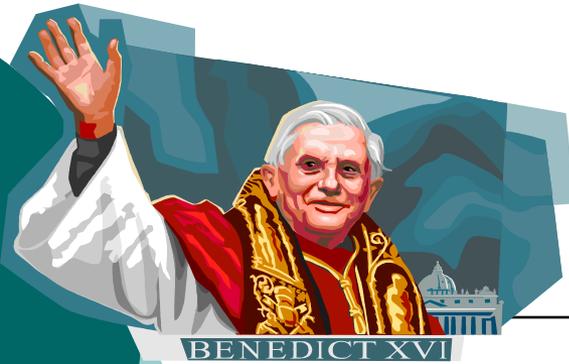


- Special place in God's saving plan;
- Associate with the sufferings of Christ crucified (cf. Mt. 27:34).
- “Furthermore, suicide is also often a refusal of love for self, the denial of a natural instinct to live, a flight from the duties of justice and charity owed to one's neighbor, to various communities or to the whole of society....”
[1,3]

John Paul II, Apostolic Letter *Salvifici Doloris* (*On the Christian Meaning of Human Suffering*) 11 Feb 1984

- “Love is also the richest source of the meaning of suffering, which always remains a mystery: We are conscious of the insufficiency and inadequacy of our explanations.” [no. 13]
- Christ showed his concern consistently to those who were suffering. . . He fed the hungry, consoled the afflicted, freed people from deafness, from blindness, from leprosy, from the devil. [\[no. 16\]](#)





Benedict XVI, Enc *Spe Salvi* (In Hope We are Saved), 30 Nov 2007

- Co-suffering, companion (*cum pane* = with bread), compassion (*cum passione* = with suffering):

The true measure of humanity is essentially determined in relationship to suffering and to the sufferer. This holds true both for the individual and for society. **A society unable to accept its suffering members and incapable of helping to share their suffering and to bear it inwardly through “compassion” is a cruel and inhuman society.** (II, 38.)

The “Perfect Life:”

a perfect life™

(if not now, when?)

- Genetic Pre-implantation
- U.S. 2006, a survey by Genetics and Public Policy Center at Johns Hopkins University found that 42% of 137 PGD clinics offered a gender-selection service.

“Loss of Dignity” or Strength Negates Personhood



Netherlands' Groningen Protocol

- (1) diagnosis and prognosis must be certain;
- (2) “hopeless and unbearable suffering” [can be anticipated due to a disability; e.g., spina bifida]
- (3) suffering confirmed by a second physician;
- (4) both parents’ informed consent; and
- (5) infant is killed “in accordance with the accepted medical standard.”

- Switzerland and Belgium also allow assisted suicide

Euthanasia: Hemlock Society



- More prevalent than people think. Check your phone book. . . .
- Estimated 25, 000 proponents of euthanasia who support mercy killing.
- In 2003, changed its name to End of Life Choices
- In 2005, Compassion in Dying and End-of-Life Choices unite; become Compassion & Choices

Principles: *ERDs* - *Consent*

N.59: The free and informed judgment made by a competent adult patient concerning the use or withdrawal of life-sustaining procedures should always be respected and normally complied with, unless it is contrary to Catholic moral teaching.

- **N.24:** Adv. Dir.; or **N.25:** Loss capacity - surrogate:

- Will of pt/best interest

- Mind of RC

- More optimal than Adv Dir.

- Agency right of refusal

- *Comfort & Consolation*



Chief Justice Rehnquist:

Washington v. Glucksberg 521 U.S. 702 (1997)

and Vacco v. Quill 521 U.S. 793 (1997)



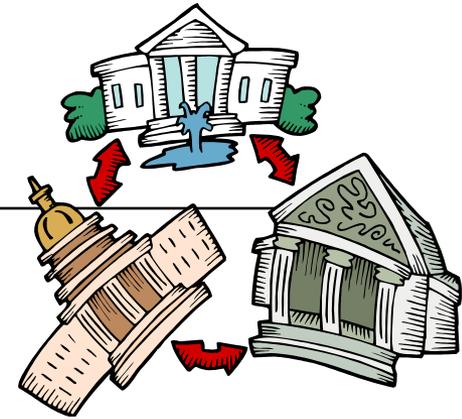
No Constitutional Right

Undermine the role of the physician

as healer, expose the vulnerable to abuse,
and initiate a steady slide toward euthanasia.

State interest in protecting the integrity and ethics of the
medical profession, protecting the vulnerable from
mistakes, and reaffirming the value of life.

State Sanctioned Killing



- Oregon Legislators Allowed: Pain and finances least significant reason; 81.6% due to “loss of dignity.”
- “Not be a burden”
- Bring It To The People
 - Washington State Ballot Initiative
 - California, Michigan and Maine Ballot Initiatives failed
 - Montana judged ruled in favor (Legislature addressing)

California; NH Terminal Sedation (defeated in MD)



- Require that for the person be informed of all “legal”
 - "terminal sedation" & not provided nutrition or hydration.
- Support a persons wishes to stop eating.
- No protection for conscience.

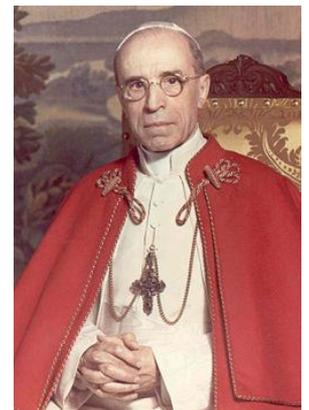
Euthanasia: *ERD N. 60*

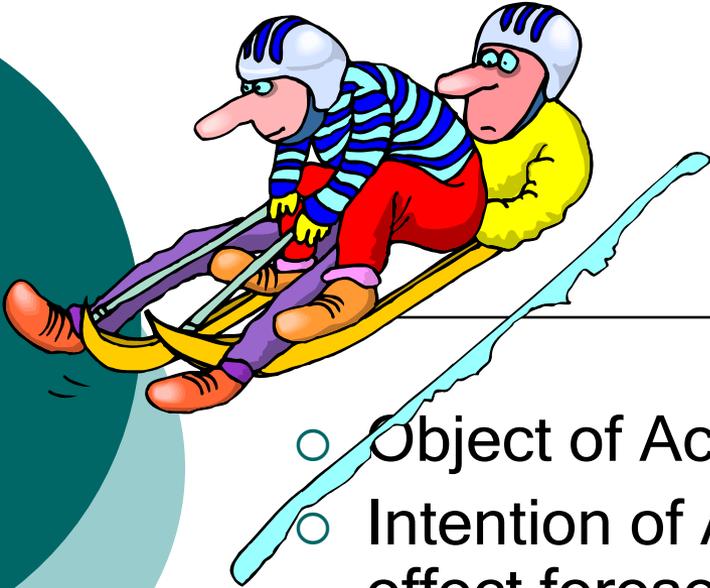


- Action or *Omission*
- Intention cause death to alleviate suffering
- Catholic health care institutions may *never* condone or participate in euthanasia or assisted suicide in any way.

Evangelium vitae, John Paul II, 1995

- Affirmed use of palliative care.
- N. 65 Pius XII affirmed that it is licit to relieve pain by narcotics, even when the result is decreased consciousness and a shortening of life, "if no other means exist, and if, in the given circumstances, this does not prevent the carrying out of other religious and moral duties"
- ERD 61 affirms [USCCB, *Ethical and Religious Directives for Catholic Health Care Services*, Fourth Edition, 2001.]





Double Effect: Pain Meds

- Object of Act: Good, or morally indifferent (Rx Pain)
- Intention of Act: Good effect intended (Relief); bad effect foreseen but unintended (Depress Respirations [RD]).
- Circumstances touching upon effects and act: Good effect not achieved by means of bad effect (RD does not alleviate pain); good effect proportionate to bad effect (pain relief for terminally ill); good effect only can be achieved concomitant, but not by means of, bad effect (pain relief can only be achieved by drugs which cause RD; drug, not RD relieves the pain).

Principles: *ERDs*



- **N.32:** While every person is obliged to use ordinary means to preserve his or her health, no person should be obliged to submit to a health care procedure that the person has judged, with a free and informed conscience, not to provide a reasonable hope of benefit without imposing excessive risks and burdens on the patient or excessive expense to family or community

Proportionate: *ERDs*



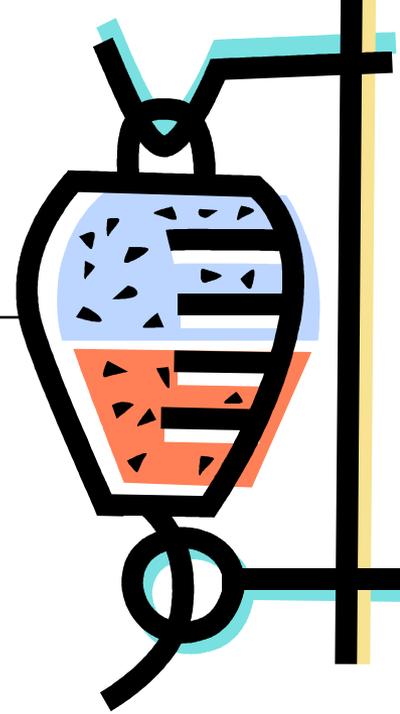
N. 56: A person has a moral obligation to use ordinary or proportionate means of preserving his or her life. Proportionate means are those that in the judgment of the patient offer a reasonable hope of benefit and do not entail an excessive burden or impose excessive expense on the family or the community.

Disproportionate: *ERDs*



- **N. 57:** A person may forgo extraordinary or disproportionate means of preserving life. Disproportionate means are those that in the patient's judgment do not offer a reasonable hope of benefit or entail an excessive burden, or impose excessive expense on the family or the community.

Nutrition/Hydration: *ERDs*



- John Paul II
 - 2004 Allocution
- CDF Response re PVS; 1 Aug 2007: in principle ordinary/proportionate; if accomplish proper finality; prevent suffering/death by starvation/dehydration.
- *ERD* 58: Amended Nov 2009

If Conflict: Ethics Committee



- Chair: director of Pastoral Care, appointed in consultation with the diocesan bishop (ERD, no.21). Faculties for clergy.
- Respect diocesan bishop's pastoral responsibility, the mandates of the *ERD*, and be familiar with Catholic medical ethics.
- Committee shall: provide ethical consultation on particular ethical situations; offer educational opportunities related to bioethical decision-making, and provide review of, and recommendations concerning, health care policies. (ERD, no.37)

Health Care Reform Proposals



- US Health Care is RC Health Care
- 1st Hospital W. Miss. River: Daughters of Charity 1828
- Proposals *Must*:
 - Not support programs which include abortion on demand
 - If public option, not see providers/agencies as agents of state subject to mandates
 - Provide conscience protections
 - Not discriminate based on age, disability, prior conditions.

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