

The Catholic Women's League of Canada Position Paper on Euthanasia

The Catholic Women's League of Canada, representing 119,000 members from all provinces and territories, views human life as a gift from God. Our Catholic tradition of reverence for human life motivates us to actively oppose any movement or legislation that would legalize euthanasia or assisted suicide. Such an action would be "a violation of Divine Law, an offence against the dignity of the human person, a crime against life and an attack on humanity."¹

Euthanasia is generally understood as an action or an omission which of itself or by intention causes death, in order that all suffering may be eliminated. Euthanasia's terms of reference, therefore, are to be found in the intention of the will and in the methods used.² A deliberate act, such as administering a lethal drug dosage, is considered to be "active" euthanasia; failure to act, i.e., withholding nourishment, medication, or treatment, is considered to be "passive" euthanasia.

In 1987, the Law Reform Commission, after an extensive review of the *Criminal Code* of Canada, recommended that euthanasia continue to be regarded as murder, a crime that presently carries a fixed minimum penalty of 10 years in prison. Despite this recommendation, there seems to be a growing movement in Canada to legalize euthanasia and assisted suicide, not only for the dying, but for the terminally ill, handicapped infants, the comatose and the elderly.

Respect for human dignity requires that any health care system support the autonomy of individuals by providing an opportunity for personal choice in treatment, insofar as is possible. All providers of health care have a basic responsibility to assist the sick, the dying, and the elderly and to respect their dignity by providing them with a measure of self-determination, with regard to their treatment. The comatose or vegetative (state) patient does not have the ability to make his or her wishes known. Nevertheless, there is still an obligation to sustain life by ordinary means. Nutrition and hydration are life sustaining and the administration of these ordinary means, even by artificial methods, is not uncommonly burdensome or expensive. Withholding or withdrawing nutrition, on the basis that it is unlikely that consciousness will be restored, causes the death of the person, not necessarily from the existing malady, but from starvation and dehydration.

On the other hand, Catholic moral teaching does not view the withholding or withdrawing of useless or futile treatment as an act of euthanasia. "In the past, moralists held that one is never obliged to use extraordinary means. This is perhaps less clear today, by reason of the imprecision of the term and the rapid progress made in the treatment of sickness. Thus, some people prefer to speak of proportionate and disproportionate means. In any case, it will be possible to make a correct judgment as to the means by studying the type of treatment to be used, its degree of complexity or risk, its cost and the possibilities of using it and comparing these elements with the result that can be expected, taking into account the state of the sick person and his or her physical and moral resources."³

"It is permissible to make do with the normal means that medicine can offer. Therefore, one cannot impose on anyone the obligation to have recourse to a technique which is already in use but which carries a risk or is burdensome. Such a refusal is not the equivalent of suicide; on the contrary, it should be considered as an acceptance of the human condition, or a wish to avoid the application of a medical procedure disproportionate to the results that can be expected, or a desire not to impose excessive expense on the family or the community. When inevitable death is imminent, in spite of

the means used, it is permitted, in conscience, to take the decision to refuse forms of treatment that would only secure a precarious and burdensome prolongation of life, so long as the normal care due to the sick person in similar cases is not interrupted. In such circumstances, the doctor has no reason to reproach himself with failing to help the person in danger.”⁴

As CWL members and sharers in a common humanity, we believe that to intentionally kill a human being is murder, regardless of the state of their physical or mental health. Matters of life, health and death are personal and unique to each person. We believe that it is our apostolic duty to assist in and promote the preservation and dignity of the gift of life. We revere and respect the dignity of life, from conception to the time of natural death.

“Death is an integral part of our life experience and for death to have true dignity, life must have full integrity.”⁵

It is our expectation that legislators and those in authority will safeguard the dignity and the right to life of all persons, without individual judgments as to the “quality of life.”

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¹ Vatican Congregation for the Doctrine of the Faith, Declaration on Euthanasia 9, 1980.

² Ibid., 17.

³ Ibid., 30.

⁴ Ibid., 34 and 35.

⁵ Oregon and Washington Bishops, Living and Dying Well, 1991.