

**Going to Battle against Assisted Suicide****April 21, 2017****By Greg Schleppenbach**

The campaign to legalize doctor-prescribed suicide has been wisely rejected by most policymakers in our society. Most people, regardless of religious affiliation, know that suicide is a terrible tragedy, one that a compassionate society should work to prevent. They realize that allowing doctors to prescribe the means for any of their patients to kill themselves is a corruption of the healing art.

But assisted suicide proponents like the deceptively-named group “Compassion & Choices” (C&C) have renewed their aggressive nationwide campaign through legislation, litigation, and public advertising, targeting states they see as most susceptible to their message. So the battle against doctor-assisted suicide continues to rage on many fronts.

In 1994, Oregon became the first state to legalize doctor-assisted suicide. The assisted suicide campaign has since advanced to legalize the deadly practice in Washington, Vermont, California, Colorado, and the District of Columbia. Montana’s highest court, while not officially legalizing the practice, suggested in 2009 that it could be allowed under certain circumstances.

Assisted suicide advocates got similar legislation introduced in 27 states this year. Thankfully, many of these bills have been, or likely will be, defeated. But several states still face serious threats, including Hawaii, Maine, New York, and New Jersey. They are also turning to courts to overturn laws banning the practice, with lawsuits pending in New York, Hawaii, and Massachusetts.

The U.S. Congress was drawn into the debate when Washington, D.C.’s City Council passed a law legalizing assisted suicide in November 2016. Our Constitution gives Congress ultimate control over D.C. laws and efforts to nullify are underway. But since Congress has not addressed assisted suicide for many years, members need basic education from constituents about why assisted suicide is dangerous for patients and their families.

Another battle ground is in the medical profession itself. Long-held opposition to assisted suicide by medical associations has been essential to preserving laws against the practice. That is why C&C is infiltrating medical associations and urging them to abandon opposition and adopt a position of neutrality. The move to neutrality by medical associations in Oregon, Vermont, and California helped pave the way for legalization of assisted suicide in those states. And now the American Medical Association is considering whether to change its decades-long position against assisted suicide to one of neutrality.

One way to counter the C&C effort is by asking our doctors their position on assisted suicide. If they oppose it, thank them for their stance and urge them to speak out against the practice with their medical associations, their state legislature and with Congress. If the answer is “support,” try to change their minds—and if they won’t, find a new doctor, letting your former doctor know why you left.

Euphemistic terms like “aid in dying,” “compassion,” and “choice” cloak the reality that assisted suicide is a deadly act: doctors prescribing a lethal drug for suicide by overdose. Far from fostering compassion or choice, assisted suicide fosters discrimination by creating two classes of people: those whose suicides we work hard to prevent and those whose suicides we assist.

Evidence shows that legalizing assisted suicide can reduce access to quality end-of-life care, put pressure on patients and their families, and open them up to abuses from insurance companies, among many other dangers. Your help is needed to expose these and other dangers. Equip yourself with fact sheets, videos, and other resources available at [www.usccb.org/toliveeachday](http://www.usccb.org/toliveeachday), [www.patientsrightscouncil.org](http://www.patientsrightscouncil.org), and [www.patientsrightsaction.org](http://www.patientsrightsaction.org) (see “Tools”).

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