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Say NO to Physician Assisted Suicide in Massachusetts

LET YOUR VOICE BE HEARD NOW!

The Massachusetts State Legislature is considering passing into law two deeply troubling bills this session which would legalize Physician Assisted Suicide. The bills, House 2381 and Senate 1384, are identical in text and titled “*An Act relative to end of life options*”.

“The Catholic Bishops of Massachusetts stand united in our strong opposition to Physician Assisted Suicide. It is an affront to life and a dangerous precedent for determining end of life issues. Physicians are trained to care for the ill, not to hasten death.”¹

Here are some troubling facts to consider before you act:

- 1) The bills would allow a physician to provide a deadly drug mixture to an individual diagnosed with less than 6 months to live that, when consumed, would cause death.
NOTE- The diagnosis could be wrong. Countless individuals have outlived that 6-month diagnosis and enjoyed many more precious months and years with family and friends.
- 2) No Real Safeguards - A vulnerable individual who is physically disabled, depressed, or fears being a “burden” may be subject to undue influence by others to take the drug mixture, especially if there is a financial benefit as an incentive.
- 3) The primary focus of elected officials should be dedicated to legislation providing quality health care, mental health care and palliative care to the sick and dying – particularly in the underserved, poor and minority communities that suffer the most at the time of need.

How can your voice be heard?

Call or email your legislators, let them know you are a Massachusetts voter, and say NO to Physician Assisted Suicide! Log on to www.macatholic.org and follow the links to find contact information for:

- Members of the legislative Joint Committee on Health Care Finance who will be considering these bills.
- Your individual State Senator and Representative via address and zip code link.

For individuals without internet access, please call the Massachusetts Catholic Conference at 617-746-5630 for legislative contact information.



¹ Boston Pilot - Statement of the four Roman Catholic Bishops of Boston, Fall River, Springfield, and Worcester (December 8, 2017)

Assisted Suicide in the States

STATE LAWS AND LEGAL POLICY AS OF APRIL 2021

10

Laws allowing PAS to take effect since 1997

11

New laws against assisted suicide (including PAS) since 1997

27

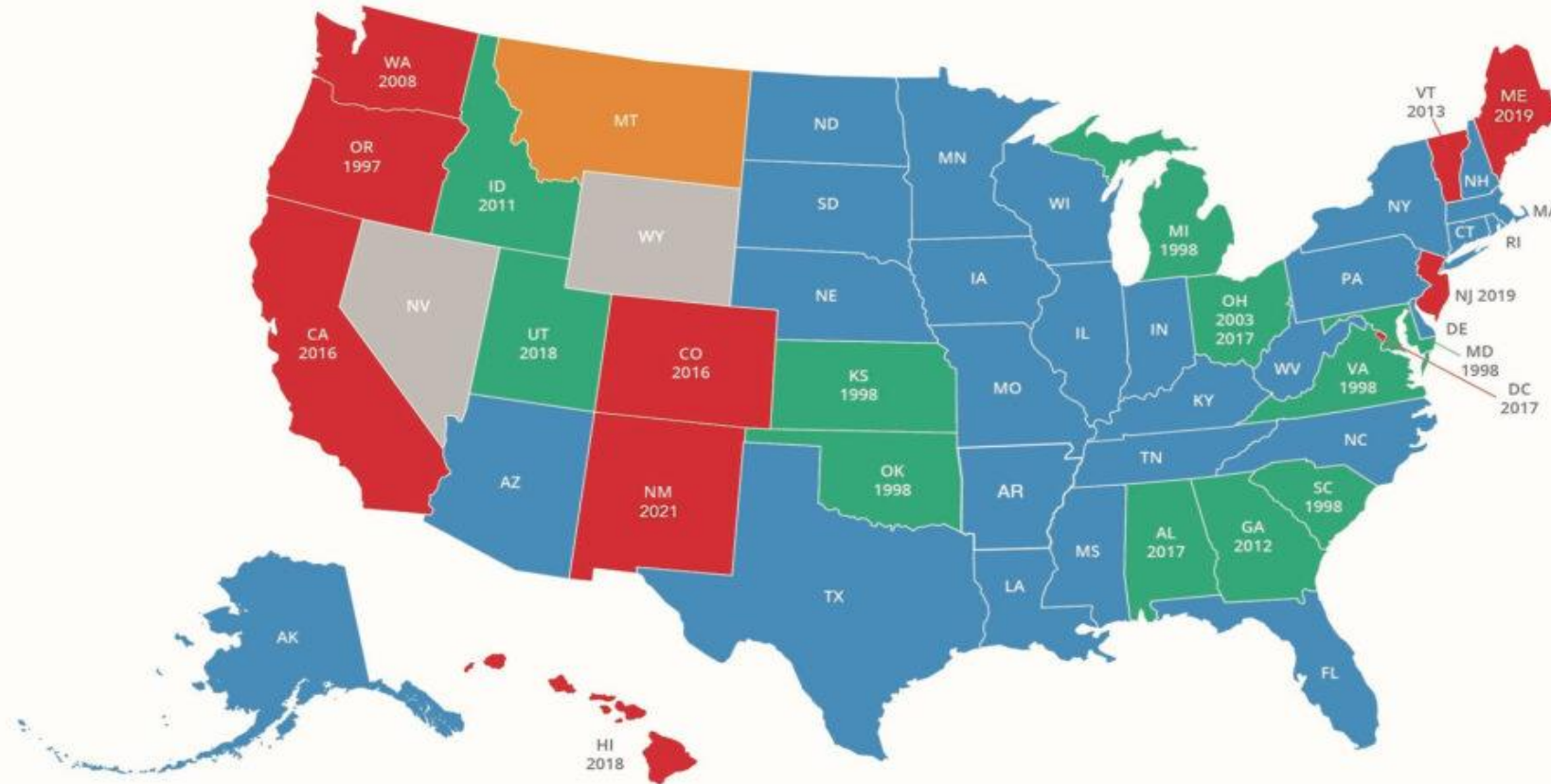
Pre-1997 bans on assisted suicide still in effect

1

Court decision that may allow PAS in practice

2

No clear policy by statute or common law



Massachusetts, North Carolina, and West Virginia have no specific statute, but do have a common law tradition allowing prosecution for aiding a suicide.
Montana: State Supreme Court ruling left older law in place, but said it does not apply to PAS when physician can show patient's consent.

Suffolk University/ Boston Globe Poll

April 24-28, 2022

Do you think a mentally sound adult with an incurable, terminal illness should have the legal option of asking a physician to prescribe aid-in-dying medication to end their suffering- yes or no?

Number of people responding - 800

Yes- 613	76.63%
No-127	15.88%
Undecided-53	6.63%
Refused-7	0.88%



ASSISTED SUICIDE DOCTORS MAKE MISTAKES

TAHNI MORELL'S STORY

"My late husband, Paul, fought an 8-year battle against colorectal cancer.

Six of those years were after being given a Stage 4 diagnosis.

"Paul lived far longer than any prognosis ever given to him by his skilled doctors at Dana Farber in Massachusetts where we live. In fact, we even had an unexpected third child when his doctors said even that was not possible. Doctors' prognoses are often inaccurate and patients can live much longer and fuller than ever expected.

When he passed, leaving behind our 3 children, aged 10, 7 and 3, every unpredicted day of Paul's life mattered. In addition to cutting short his unpredicted longer life by an unnatural death, the further tragedy would have been all we would have lost that often only occurs during the very end stage of dying. In that time, even while on oxygen, weak and coughing throughout, Paul painstakingly made individual videotapes for our children expressing his love and hopes for them.

Paul and I cried together, prayed together, shared intimate conversations of love and forgiveness. Those conversations were so healing —and they never would have occurred like that in prior weeks when he was feeling stronger. And as I saw Paul weaken, it helped me to loosen my desperate grip on my beloved husband and to be able to let him go as well. Soon thereafter, with hospice support and with our daughter, Julia— who later said that if her dad had taken a cocktail to die that it would have felt like a betrayal to her— instead, she stroked his face and whispered, 'Daddy, you can go home now; we will be okay. . .' and Paul passed painlessly and peacefully.

Truly, I tell you, there is so much profound purposefulness in the very final stages of dying. It was such a sacred process that I would have never wanted to cut short. Personally, I know that the subsequent grief that my children and I endured was immeasurably more uncomplicated and had more closure due to sharing in the natural process of death together."