

## **LIFE ISSUES FORUM**

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**The Price of Life  
By Mary J. McClusky**

Imagine if your state of residence put a price tag on your life. Though it sounds like something out of “The Twilight Zone,” that’s exactly what happened to Randy Stroup and Barbara Wagner, both cancer patients residing in Oregon, home of the nation’s only taxpayer-funded, doctor-assisted suicide option for the terminally ill. Uninsured and battling prostate cancer, Stroup applied to his state-sponsored health insurance plan to fund his chemotherapy. He was shocked to receive a letter saying they would not cover his chemotherapy drug, but would cover the cost of physician-assisted suicide. “It dropped my chin to the floor . . . [How could they] not pay for medication that would help my life, and yet offer to pay to end my life?” said Stroup. The same offer to cover assisted suicide instead of treatment was made to Wagner, who is battling lung cancer. Their stories compel us to consider the effects of legislation like this, where it may lead us, and how we should react.

Physician-assisted suicide laws contribute to the overall devaluing of human life. Rather than recognizing the inestimable worth of every individual, they promote the erroneous idea that life is a commodity up for cost analysis by the state. These laws perpetuate the idea that instead of protecting our citizens’ right to life, government should encourage and facilitate the eradication of those deemed a financial burden to society. These stories reveal a zero sum mentality of rationing resources, instead of an attitude of abundance and generosity for our suffering brothers and sisters.

With the exception of Oregon, all other attempts to legalize assisted suicide in states have failed, but efforts continue and may eventually succeed. Washington state voters will likely face such a ballot initiative this fall. If other states follow Oregon’s example, the “slippery slope” may expand our notion of who is falsely considered a burden to society. The Swiss group Exit

International recently agreed on a resolution to vote in 2009 on expanding its criteria for assisted suicides from “terminally ill” to include those “being tired of old-age.” As bioethicist Wesley J. Smith has observed: “Once one accepts the premise that suicide is an acceptable answer to the problems of human suffering and ennui, there are no boundaries that will hold for long.” In 2001, for example, soon after the Netherlands legalized euthanasia, the Dutch Minister of Health suggested suicide pills for elderly persons who are tired of living.

We must resist the spread of assisted suicide. Stroup fought back and won coverage for his chemotherapy, and a pharmaceutical company will donate Barbara Wagner’s needed drugs, so we can see that there is hope in the fight. Learn what the Church teaches on end of life issues. Pray for increased respect for all human life. Stay alert for legislative efforts in your own state which threaten those who are elderly, sick or dying. We all are obligated to continue to spread the Gospel of Life and to teach that every life, regardless of age or condition of dependency, is a priceless gift.

Mary McClusky is Special Projects Coordinator at the Secretariat for Pro-Life Activities, U.S. Conference of Catholic Bishops. To learn more about the bishops’ pro-life activities, go to [www.usccb.org/prolife](http://www.usccb.org/prolife).