

George Will's Cultural Death Wish

by Wesley J. Smith August 30, 2015 5:52 PM

Response To... Is It Ethical to Affirm ...

What a disappointing and shallow column from George Will endorsing assisted suicide, based primarily on a bald assertion that autonomous decision making is “death with dignity.” (If committing assisted suicide is “death with dignity,” then are those who die naturally undignified?)

The column was disingenuous and misleading, both in what Will wrote and what he left out.

For example, he correctly admits that pain is not the cause of people wanting to kill themselves under Oregon's assisted suicide law, but “existential suffering,” e.g. fear of being a burden, fear of losing dignity, etc.. But then he falsely and cruelly claims that these latter matters “cannot be alleviated.”

Talk about hope-destroying! As a hospice volunteer, I have seen with my own eyes that such fear and anguish can be remedied. In fact, that is a crucial part of what hospice does, as do committed mental health professionals who work with seriously ill patients and their families. (For an informed analysis of this question, see the work of Dr. Ira Byock and the book *Being Mortal* by Atul Gawande).

Will then alludes to terminal illness as a necessary qualifier for legalization. But why? Once one accepts doctor-prescribed suicide as a proper response to human suffering, how in the world could it ever be permanently limited logically to the dying?

Existential suffering is often worse and extreme in chronic and non-terminal conditions—such as long-term disability, long-term severe back pain, mental illness, etc.—than for those who are terminally ill. Thus, were existential suffering a proper justification for assisted suicide, under Will's poison prescription, doctor-facilitated death should be available for those suffering people too, and indeed, with a greater urgency since their deep existential difficulties can last far longer do those of the dying.

Indeed, the disability rights movement is almost unified in opposing assisted suicide precisely because they know that disabled people are the prime targets of the death movement.

Moreover, once society generally accepts the dark premise that killing is an acceptable way to end suffering—we haven't yet—there is no way to effectively constrain euthanasia inflation.

This isn't a “slippery slope” argument but determinable from facts on the ground. Thus, in addition to the physically ill and dying, doctors in Belgium and the Netherlands kill the mentally ill, the healthy elderly “tired of life,” and in Belgium, even engage in joint killings of married couples that fear widowhood and/or dependency.

Switzerland's legal suicide clinics have facilitated the deaths of people who are not sick for existential reasons. Recently, an elderly Italian woman received assisted suicide because she was in despair over her loss of beauty. The first her family knew that she was dead was when the suicide clinic mailed the family her ashes.

Will uses an “average” number of deaths from the beginning of Oregon's law's going into effect (1997) to make it seem that only a few people would die if the USA legalized assisted suicide. But the death trajectory for all jurisdictions with legal assisted suicide/euthanasia is up.

In 2014, doctors self-reported—that is the only way to know in Oregon, it could be much more for all anyone knows—that 105 people died from prescribed lethal overdoses.

If the entire country allowed assisted suicide—using the numbers from Oregon—the annual assisted suicide toll would be more than 10,000. (Oregon has just over 1% of USA population.)

If our assisted suicide rate became as high as the medically hastened death rate in Belgium and the Netherlands, the number of doctor-hastened deaths would soon hit six figures.

So a lot more is at stake in this controversy—for vulnerable individuals, families, the medical profession, the health care system, and our culture—than to which Will alludes. His superficial analysis, blithe shrugging that we live on multiple “slippery slopes,” and astonishing underplaying of the profound stakes of this debate was not helpful to a full understanding of one of the most crucial moral and legal issues of our time.

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