



PARISH RESOURCE KIT

The public policy advocate for the Catholic Church in Maryland | mdcatholic.org/parish

PHYSICIAN-ASSISTED SUICIDE

www.mdcatholic.org/pas

RESOURCES

- Flocknote and bulletin announcements
- Prayers of the faithful
- Graphics for email, web and social media
- Homily hints

WANT TO KNOW MORE?

- Book a speaker or get more information and ideas on promoting respect life topics:
Molly Sheahan, Associate Director for Respect Life Advocacy
molly@mdcatholic.org | 410.269.1155
- Looking for other topics or ideas on how your parish can be involved in advocacy in Maryland?
Susan Gibbs | communications@mdcatholic.org | 410.469.1155 or 202.525.9554

JOIN THE CATHOLIC ADVOCACY NETWORK!



The Catholic Advocacy Network is the official state legislative action center for Catholics in Maryland. Sign up to get occasional e-newsletters, plus action alerts on issues that matter to you. Go to mdcatholic.org/joincan or text CATHOLIC to 443-764-8765



BULLETIN | FLOCKNOTE

What actually happens in a physician-assisted suicide?

A doctor prescribes a lethal drug cocktail – up to 100 pills – that a person picks up at the local pharmacy, grinds up into half a cup of water, and drinks in less than two minutes. Sometimes, the person can take hours or days to die. Plus, there are no requirements for a witness or notification of family. Assisted suicide isn't dignified, it's deadly. Tell your Maryland legislators: NO assisted suicide. Visit mdcatholic.org/pas

Physician-assisted suicide incentivizes denying cancer treatment

In states where assisted suicide is legal, insurance companies have turned down coverage for cancer treatment but offered to pay for suicide drugs instead. Stop this from happening in Maryland. Tell your state legislators: NO assisted suicide. Visit mdcatholic.org/pas

Physician-assisted suicide urges suicide for elderly

Elderly in Maryland have a higher rate of suicide than any other age group - double the teen suicide rate. Yet a proposed physician-assisted suicide bill would not require any mental health evaluation to screen for depression. Assisted suicide isn't dignified, it's deadly. Tell your state legislators: NO assisted suicide. Visit mdcatholic.org/pas

Physician-assisted suicide tells people they're burdensome

In Oregon, data shows people request suicide drugs not for pain, but because they can't do the same activities that they could before, can't control bodily functions, feel they've lost dignity or feel they are a burden. Suicide drugs aren't the answer. Everyone deserves loving, supportive care, affirmation of their dignity, and to know that they are never a burden. Tell your state legislators: NO assisted suicide. Visit mdcatholic.org/pas

Physician-assisted suicide is dangerous for Maryland

If assisted suicide became legal, up to 100 pills would be prescribed to a person. These lethal drugs would then be dispensed at your neighborhood pharmacy. Data shows that where assisted suicide is legal, up to 40% of the drugs are never used – and there are no requirements for their disposal. They could end up in the hands of kids, in the trash or in a local creek or pond. We don't need that in Maryland. Assisted suicide isn't dignified, it's deadly. Tell your legislators: NO assisted suicide. Visit mdcatholic.org/pas

Disability rights activists oppose physician-assisted suicide

Major disability rights groups including The Arc of Maryland and National Council on Disability oppose physician-assisted suicide. Disabled people already face prejudice from doctors and people who assume they're "better dead than disabled." Assisted suicide encourages this kind of prejudice. People with disabilities deserve care, not suicide. Tell your state legislators: NO assisted suicide. Visit mdcatholic.org/pas

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Doctors oppose physician-assisted suicide

The American Medical Association, American Psychiatric Association, and dozens of other medical groups oppose physician-assisted suicide. The AMA says, “Physician-assisted suicide is fundamentally incompatible with the physician’s role as healer.” Physicians are entrusted with saving lives, not ending them. Tell your legislators: NO assisted suicide. Visit mdcatholic.org/pas

Marylanders deserve excellent pain management, not physician-assisted suicide

Maryland has excellent, modern palliative care programs to alleviate suffering – no one’s pain should be unmanageable in our state. Hospice care is paid for by Medicare, Medicaid, and private insurance. Marylanders deserve the best in pain management and quality care, not suicide drugs. Tell your legislators: NO assisted suicide. Visit mdcatholic.org/pas

Join the Maryland Catholic Advocacy Network

Our state’s General Assembly creates laws that affect us, our church, families, and vulnerable neighbors. The Maryland Catholic Advocacy Network keeps you informed and gives you a voice. You will receive occasional email updates from the Maryland Catholic Conference, plus action alerts on topics you choose: mdcatholic.org/joincan or text CATHOLIC to 443-764-8765.



PRAYERS *of the* FAITHFUL

For all who are about to die: that through our love, care, and devotion, they might know the beauty of life, as they prepare for death; We pray to the Lord:

For all people in nursing homes: that we would be inspired to visit them, and remind them of their great worth; We pray to the Lord:

For those denied adequate care: that we might stand up for their God-given dignity and assist them in their needs; We pray to the Lord:

For all who are forgotten or thrown away, and especially for the poor, the sick and the aged: that God might change our hearts and move us to love them as the image of Christ; We pray to the Lord:

For those who have grown tired of life, and especially for those tempted to suicide: that God might grant them patient endurance and the support of loved ones; We pray to the Lord:

For those tempted to despair because of constant pain: that they might join their suffering to the Cross of Christ; We pray to the Lord:

For nurses and all professionals who care for the sick and dying: that they will be given the grace to love each patient with the love of Christ, and to never see those they care for as a burden; We pray to the Lord:

For those who have grown weak or infirm: that we might see God's power in their fragility and experience a new revelation of God's love for them; We pray to the Lord:

For elderly parents and godparents: that the love and respect of their children might sustain them and bring them joy; We pray to the Lord:

That the sick may find strength and courage in the cross of Christ and discover the redemptive value of their suffering; We pray to the Lord:



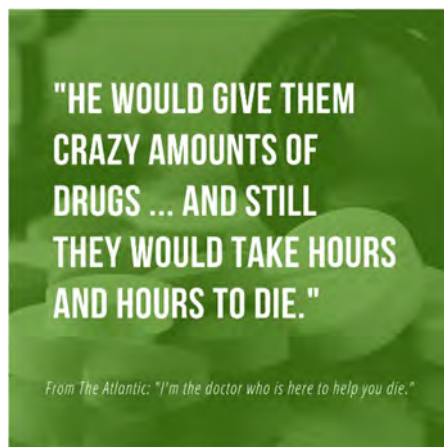
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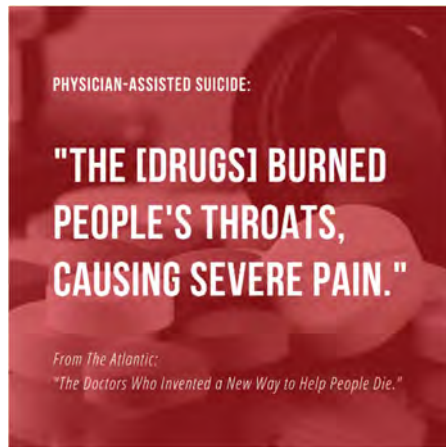
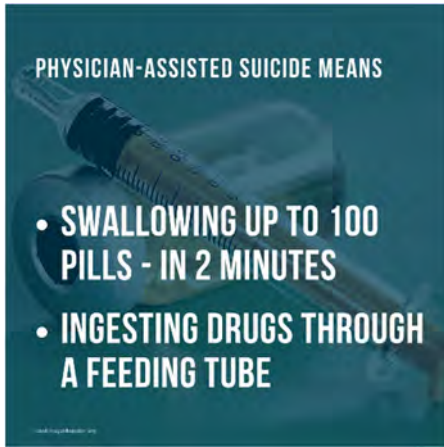
SOCIAL MEDIA POSTS

Did you know that powerful out-of-state activists are trying to bring physician-assisted suicide to Maryland? Learn more and sign up to oppose suicide: www.mdccatholic.org/pas and [@mdccatholic](https://twitter.com/mdccatholic)

Powerful out-of-state activists are trying to bring physician-assisted suicide to Maryland. Learn why it matters for you and your family. Sign up for “Deadly, not Dignified: Fighting Physician-Assisted Suicide in Maryland” from [@mdccatholic](https://twitter.com/mdccatholic). Register for the Oct. 5 webinar at www.mdccatholic.org/pas

Graphics are online at www.mdccatholic.org/pas-parish, sized for social media and Flocknote/emails. Contact us at susan@mdccatholic.org if you need other sizes or have questions.





EMAIL/FLOCKNOTE HEADERS

This image and the images above are available at mdcatholic.org/parish-pas, formatted for email.





HOMILY HELPS

Adapted from Archdiocese of Washington Department of Life homily hints

NOTE: The Maryland legislative session opens in January. Beginning to speak about the issue in Respect Life Month will assist the faithful so they are prepared prior to the introduction of the latest physician-assisted suicide bill.

- [Oct. 17](#) Service, caring for the elderly vs. assisted suicide; the Feast of St. Luke the Evangelist, patron saint of physicians, is the following day
- [Oct. 31](#) Love of God and neighbor, caring for the elderly vs. assisted suicide
- [Nov. 14](#) End times, death and resurrection, preparing for death vs. assisted suicide
- [Nov. 28](#) End times, preparing for Christ and resurrection vs. assisted suicide

1. Assisted suicide completely denies the inherent dignity of all human life and discriminates against the poor and the vulnerable.

*The Catechism: **2258*** "Human life is sacred...God alone is the Lord of life from its beginning until its end: no one can under any circumstance claim for himself the right directly to destroy an innocent human being."⁵⁶

2. Assisted suicide discriminates against racial and ethnic minorities.

Because of significant disparities in access to healthcare, people of color often do not have the same access to preventative medical care, specialized medical care, or insurance as whites. If assisted suicide is legalized, people of color will be more marginalized, offered suicide drugs rather than better healthcare options.

3. Assisted suicide discriminates against the poor and the elderly.

Insurance companies already have told several individuals in states where it is legal that their company would not pay for chemotherapy but would pay for assisted suicide drugs. Additionally, doctors have counseled patients to choose assisted suicide so as not to burden their families.

4. Assisted suicide discriminates against individuals with disabilities.

Bills introduced in Maryland imply that when person does not have complete ability and autonomy to do everything that a typical person can do, his or her life does not have value.

*The Catechism: **2273*** When the state does not place its power at the service of the rights of each citizen and, in particular, of the more vulnerable, the very foundations of a state based on law are undermined...

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- 5. A physician-assisted suicide bill would create mistrust between doctors and patients because doctors will be prescribing lethal prescriptions.**

Evangelium Vitae: “Causing Death” runs completely counter to the health-care profession, which is meant to be an impassioned and unflinching affirmation of life.

- 6. A physician-assisted suicide bill would give insurance companies a cost-effective solution to dealing with clients who have costly terminal illnesses—a cocktail of the same pills given when the death penalty is administered.**

To Live Each Day with Dignity: Why would medical professionals spend a lifetime developing the empathy and skills needed for the difficult but important task of providing optimum care, once society has authorized a “solution” for suffering patients that requires no skill at all? Once some people have become candidates for the inexpensive treatment of assisted suicide, public and private payers for health coverage also find it easy to direct life-affirming resources elsewhere.

- 7. Compassion and Choices, the sponsor of the bill, provides referrals to doctors who will prescribe assisted suicide drugs even when other doctors have denied prescriptions because they feared patients were being coerced, mentally incompetent, or suffering from depression.**

Evangelium Vitae: Here we are faced with one of the more alarming symptoms of the "culture of death," which is advancing above all in prosperous societies, marked by an attitude of excessive preoccupation with efficiency and which sees the growing number of elderly and disabled people as intolerable and too burdensome. These people are very often isolated by their families and by society, which are organized almost exclusively on the basis of criteria of productive efficiency, according to which a hopelessly impaired life no longer has any value.

- 8. Providing patients a prescription to kill themselves is the opposite of compassion.**

Throughout the Gospels we witness again and again the healing love that Jesus brings to his encounters with those in need. A truly compassionate response to a patient fearful of suffering, or of being a burden at the end of his or her life is to ensure they have access to adequate pain management, palliative care, and most of all, our caring companionship.