

## **Catholic Bishops of Saskatchewan**

### *Care for the Dying: Pastoral Guidelines in an era of Physician Assisted Suicide and Euthanasia*

Dear brother priests, deacons, and Catholic faithful of Saskatchewan,

We have arrived, with sadness and mourning, at a time in our history and our country where physician assisted suicide and euthanasia<sup>1</sup> are legal and available through our health system. For those among us who minister to people facing chronic and terminal illness, this new context is deeply troubling, and made even more painful because as a society we have not prioritized access to palliative care with effective pain management for all our people. Our Catholic faith is unwavering in its respect for and protection of human life from conception to natural death. We cannot and will not participate in or support euthanasia or physician assisted suicide, to which we are morally opposed (cf. Ex. 20:13).

At the heart of our Christian faith is the conviction that God's love is revealed most profoundly in the dying and rising of Jesus, and that in our living and dying, we are drawn into this paschal mystery, which opens onto eternal life. We believe that there is a great dignity in being human, and that God, who has authored human life, speaks to us and draws us into communion with Himself through our living and through our dying. As St. Paul says, "If we live, we live to the Lord, and if we die, we die to the Lord" (Rom. 14:8). In our Christian lives, we are invited to learn to live for others and for God, dying to self (cf. Rom 12:1); dying, as a stage of living, is always in the context of the redemptive work of God. This more than anything else shapes our approach to the end of life.

Trusting that God is present to and at work in every human life, we are called to minister generously to all who call on us, regardless of their faith, with a bias toward life and our understanding of it as God's beautiful gift. We offer these guidelines to help our parishes to cultivate a healthy and positive attitude towards life, even amidst trials, and to assist our pastoral ministers and care givers in walking compassionately and faithfully amidst painful and complex end of life situations. Our ministry as Christians is twofold: first, to proclaim the good news and form people in it, and second, to be with God's people wherever life leads them, especially when they invite us into their journeys.

#### **1. To proclaim the good news and form people in it.**

In light of our Christian hope, we are asking you to join us in doing formative work in your parishes and communities to change the conversation about dying so that fewer people will feel that ending their lives is an appropriate option. All Christians need to be able to speak about and witness authentically to the spiritual work of living through the painful mystery of dying, for our own sake and for the sake of the world. That witness is especially needed in a context where many have lost sight of the dignity of human life even amidst suffering and dying.

#### **2. To be with God's people wherever life leads them.**

We are called into ministry with people as they are, not as we would hope them to be. This has always and ever been the case. In inviting us to share in his mission, the Risen Lord sends us to love His people

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<sup>1</sup> Euthanasia and physician assisted suicide are formally called Medical Aid in Dying (MAID) within the Canadian healthcare system.

in the messy and difficult circumstances of human life. We are privileged to be invited into people's lives; this is holy ground and God precedes us there.

Within the church and outside of it, some people will consider and are considering physician assisted suicide. For any of us who might accompany one of these people, with respect for the roles and respective accountabilities we have as family members, caregivers, spiritual care providers, or pastors, there are five considerations which we would ask you to keep at the forefront of your ministry of care.

i) *The generous and unconditional love of God.* Our ministry is a participation in God's love for His people. We are called to act as witnesses to and bearers of God's generous love. God is the author of life and we are its stewards. Our bias is toward abundant life, and we offer sacraments, prayer, visiting, accompaniment in palliative care where possible, and many other kinds of support in the service of loving people as God loves them. Where people are contemplating decisions we disagree with, depending on your role, you may be able to assist in their discernment, gently and appropriately offering another way of seeing, with hope and trust in God.

ii) *The call to walk with the dying.* A normal reaction for caregivers as we witness the pain and suffering of others is our tendency to try to 'do' something to fix it, to make it better. But that is not always helpful. Often, the most important thing we can offer is to 'be' present and accompany them in their darkest hour of their fears, uncertainties, questions, and pain. Serious illness can be excruciating, and dying can be a prolonged agony. For some, the darkest moments may lead them to contemplate physician assisted suicide as an option. As people of faith and hope, this is not something we can support nor is it something we can participate in. What we can offer as Church is our promise to be there; to remain engaged and in relationship; to help create a space where hope can make a home amid lingering fears; and to pray constantly for the conversion of heart, which we earnestly desire and believe possible to the very end. Our role is as one who keeps vigil alongside others in times of joy or sorrow, and stands with humble trust between what is known and the mystery of the unknown.

iii) *The freedom and conscience of the person who is dying.* Each of God's people has been given the gift of freedom, and even while we hope that everyone chooses God freely, we must never infringe on another's freedom. In the very rare circumstances where a sacrament or funeral is denied, it is because that rite would be a violation of that person's free decision to reject in some measure God's grace, and therefore would not be an honest expression of the Church's faith. Even in these instances, the Church never abandons people. Non-sacramental rituals can and should be offered with reverence for freedom and integrity. Ministry also must be offered generously to those who surround the person making the decision: friends and family, caregivers, and healthcare professionals.

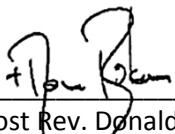
iv) *Your action on behalf of the whole Church.* To be a Christian is to belong to the body of Christ, one part among many members. When we act, we necessarily impact our brothers and sisters. We encourage our priests and those working for the Church in pastoral care who face difficult pastoral decisions to please contact your bishop for designated resource persons to support your discernment around the pastoral approach to those who have raised the possibility of physician assisted suicide, or regarding funeral requests for those who have died in this way. You are on the front lines of the Church's pastoral outreach, and we trust that you will strive to respond to situations which may be very complex with a deep pastoral engagement and a desire to show the face of God's mercy. We cannot anticipate all of the circumstances you might face, but we can ensure that you do not face them alone. We urge you not to make decisions on these situations without consulting those experts in ethics,

theology, canon law, and pastoral practice who can help you to make decisions in keeping with your conscience and the wisdom of the broader Church.

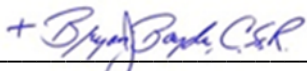
v) *Your own well-being and conscience.* These situations may well push us as individuals to the edges of our own comfort and/or capacity. Amidst circumstances that are ethically challenging and potentially compromising, you also have a duty to yourself: to violate your own conscience would be both damaging and sinful. For whatever reason, if you are not able to enter into a situation, there is no shame in asking for assistance; indeed it is your responsibility to do so.

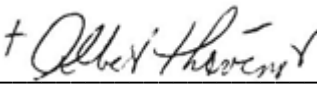
In this, as in all things, we bring each and every person we serve to the Lord in prayer. We mourn every time a person contemplates or chooses to end his or her own life. We acknowledge and are deeply saddened by the burden placed on those asked to collaborate in ending a life. We place ourselves and our circumstances humbly in God’s hands; we commit ourselves to working faithfully to the best of our ability to be artisans of Christ’s healing and agents of the hope and love He came to bring. As we do so, we ask the intercession of Mary, Mother of Jesus, who points us to her son, and shows us how to accompany others by the way she was receptive to Jesus in his living and kept vigil with him in his dying.

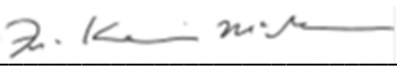
Sincerely,

  
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Most Rev. Donald J. Bolen  
Archbishop of Regina

  
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Most Rev. Murray Chatlain  
Archbishop of Keewatin-Le Pas

  
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Most Rev. Bryan Bayda  
Eparchial Bishop of Saskatoon

  
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Most Rev. Albert Thévenot  
Bishop of Prince Albert

  
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Very Rev. Kevin McGee  
Diocesan Administrator for Saskatoon