

Mercy affirming the dignity of every human life

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IN Mercy circles, November 11 is remembered as the anniversary of Catherine McAuley's death. Like so many of her Irish contemporaries she died of tuberculosis, 63 years old, to be buried 'in the same way as poor people, in the earth.' Her grave is in the garden of the house she had built in Baggot Street, visited now by the many who come to catch something of the spirit of this remarkable woman.

She did not expect to be remembered, believing that the works of mercy were the result of God's grace and that a time would 'come in a few years when we and our actions will be forgotten and unknown.' As Catherine lay dying, she asked that her boots be burned in the kitchen fire – a eloquent admission that her days of walking in search of the poor and suffering were over. But almost two centuries on, the witness of her life still inspires many of us to keep the flame of mercy burning, shedding light and hope for those who wait in darkness for a brighter and more fulfilling life.

This November has another significance in New Zealand, as the End of Life Choice Act 2019 comes into effect, allowing some of those who suffer unbearably from a terminal illness to legally ask for medical assistance to end their lives. The prospect of assisted dying has drawn a line for Mercy healthcare and aged care facilities, which have had to adopt the position of conscientious objection to what the Act permits. Mercy values and Catholic moral principles mean that facilities like Mercy Hospice Auckland and Waiatarua Mercy Parklands have a declared moral position that needs to be protected under the right to freedom of conscience as upheld by the New Zealand Bill of Rights Act.

These facilities remain committed to the delivery of palliative care, which neither hastens nor postpones death. In Mercy's view, such care affirms life and regards death as a normal process. It provides relief from pain and other distressing symptoms, enabling people to live fully and comfortably to the natural end of their lives and to die in peace and dignity. From the Catholic moral perspective, euthanasia and assisted dying are seen not as health procedures but as a violation of healthcare ethics. However, patients do have a right to refuse or request withdrawal of life-prolonging treatments such as CPR, or the administration of medically assisted nutrition. Withholding treatment that is non-beneficial or burdensome at the end of a patient's life does not constitute euthanasia.

Ahead of the introduction of assisted dying, staff and volunteers at Mercy healthcare facilities which provide palliative care are being offered appropriate and ongoing training as to how to respond to questions from patients and residents relating to this issue. The challenge they face will be to make clear that their facility has adopted the position of conscientious objector to assisted dying, yet still continue to support patients or residents and respect their rights to compassionate care.

Time will tell what complexities individual cases may bring, but the basic principles are clear enough. Mercy affirms that all human life has value and intrinsic dignity. Assisted dying in

> any form is contrary to the ethics and philosophy of care offered by Mercy health facilities. Rather than participating in processes that foreshorten human life,

Mercy advocates for increased funding to provide accessible, affordable palliative and hospice care to all who need such services. Mercy healthcare facilities remain committed to providing best-practice and holistic care for their patients and their families as they face the difficulties posed by life-threatening illnesses.

Let the witness of Catherine McAuley, who trusted until she drew her last breath in the tender love of God, guide the steps of all involved in Mercy healthcare along this new and unchartered path.