

End-of-Life Decisions and Advance Directives: A Catholic Perspective

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"Lord our God... With unparalleled love you have saved us from death and drawn us into the circle of your life.... (XXIII Sunday A) That prayerful praise of creation and redemption illumines the shape of a Christian response to the inevitable mystery of the human condition—the mystery of life and death.

The biblical vision of creation resounds with the affirmation that all creation comes from nothingness to fruitfulness. Since God alone is the Author of life, life is both a gift and a task. Life is a gift of a gracious God who has loved each of us into life and created us for eternal life. At the same time, as stewards of that gift, we have the responsibility to preserve our lives and live that gift fruitfully and faithfully.

The Christian vision of life, then, calls for reverence for life from birth to natural death. Birth and death are peak moments of the encounter with mystery and transcendence, moments that call forth trust in our radical dependence on God and our interdependence with one another. Human life stands most vulnerable "when it enters the world and when it leaves the realm of time to embark on eternity." (*Evangelium Vitae* (1995): n. 44)

In facing the end of life, the redemptive death and resurrection of Jesus proclaims that there is always a transforming meaning in living through sickness and death, for death has been transformed into a saving mystery.

The doctrines of creation and redemption assure us in faith that all stages of life are moments embraced by God's loving support which empowers us to live fruitfully and faithfully. As the Vatican *Declaration on Euthanasia* (1980) points out: "Everyone has the duty to lead his or her life in accordance with God's plan. That life is entrusted to the individual as a good that must bear fruit already here on earth, but that finds its full perfection only in eternal life."

Christians, therefore, live their earthly lives on the horizon of eternity. In the words of Pope John Paul II, death is "the door that opens wide on eternity and, for those who live in Christ, an experience of participation in the mystery of his [Christ's] death and resurrection." [*Evangelium Vitae* n. 97.]

In defending the sanctity of human life, the Catholic moral tradition rejects any intentional aiming at death. Euthanasia and assisted suicide, therefore, are grave moral evils.

Yet, since death is an inevitable part of the human condition, life need not be preserved at all costs. There is an essen-

tial moral difference between "allowing death" and "causing death." As the Catechism of the Catholic Church points out, discontinuing burdensome or disproportionate treatments does not "cause death." Rather, in allowing a patient to die, judgments made on such grounds simply indicate the acceptance of "one's inability to impede death." (CCC n. 2278)

Historically the concepts concerned with the moral obligation to reverence the sacredness of life have been expressed in the terms ethically "ordinary" and "extraordinary" means to conserve life. In recent decades, with the advance of medical technology, the terms "proportionate" or "disproportionate" means to preserve life seem more appropriate for attending to the complexity of medical situations in relationship to the condition of patients.

In an ethical sense, ordinary or proportionate means are obligatory; extraordinary or disproportionate means are optional.

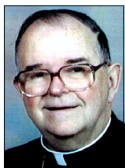
Part Five of the Ethical and Religious Directives for Catholic Health Care Services (2001) treats issues in care for the dying. Three directives in particular explain moral responsibilities regarding decisions about medical procedures and treatments.

Directive 56 upholds a person's moral obligation "to use ordinary or proportionate means of preserving his or her life." Directive 57 stipulates that a person "may forgo extraordinary or disproportionate means of preserving life." Ethically disproportionate means are "those that in the patient's judgment do not offer a reasonable hope of benefit and do not entail an excessive burden, or impose excessive expense on the family or the community." Directive 58 establishes a presumption for the provision of nutrition and hydration to all patients "as long as this is of sufficient benefit to outweigh the burdens involved to the patient."

The norms set forth by the US Conference of Catholic Bishops in the Ethical and Religious Directives cited above apply traditional Church teaching normatively set forth in the Congregation for the Doctrine of the Faith's *Declaration on Euthanasia* (*Jura et Bona*, 1980) (See also the *Catechism of the Catholic Church* (1994) nn. 2278-2279; Pope John Paul II, *The Gospel of Life* (*Evangelium Vitae*, 1995) nn. 64-67.)

The Declaration on Euthanasia presents a concise overview of the Catholic doctrine on the moral norms relative to end-of-life issues. The Declaration interprets the principle of burden and benefit (proportionate / disproportionate means) in this fashion:

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“We Are All Really Responsible For All.”

Welcome Ex-felons Home: Restore Right to Vote

By Ed Monahan
Executive Director



Ed Monahan
Executive Director
Catholic Conference of Kentucky

America’s symbol of justice is a blindfolded woman. God’s justice is not blind; rather, it is imbued with mercy. Ex-offenders should be welcomed back into society as full participating members, to the extent feasible, and have their right to vote restored. The parable of the Prodigal Son in Luke’s Gospel (Luke 15:11-32) teaches us about accepting and forgiving those who return after turning away. Jesus Himself offered forgiveness regardless of whether the person was repentant when he said, “Father, forgive them, they know not what they do.” (Luke 23:34).

Helping people obtain the right to vote is a significant public policy issue for our Commonwealth. It is estimated that over 109,000 adults who have served their sentences have been disenfranchised in Kentucky as a result of their conviction. But the Kentucky Constitution states that felons may have their civil rights restored only through an executive pardon by the Governor. Kentucky is one of only five states that disenfranchises all ex-felons.

The right to vote is a foundation of citizenship. It is so important that section 2240 of the *Catechism of the Catholic Church* requires the exercise of voting as a moral obligation: “Submission to authority and co-responsibility for the common good make it morally obligatory to pay taxes, to exercise the right to vote, and to defend one’s country....”

We require ex-felons to pay taxes and comply with the laws enacted by their legislators when they return to their communities. We should automatically restore their right to vote. Pragmatically, the restoration of voting rights promotes rehabilitation and reintegration into the community.

It is in a community’s interest to encourage participation in its activities. Voting is the fundamental expression of speech. The greater degree to which parolees have positive connections with the community, the more likely it is that they will engage in positive social activity. People who vote become more a part of the community and they have a greater stake in their society, both of which will result in their chance to become successful in life. This is something we want as a society. It is in our significant self-interest. It is something we seek as Christians.

Voting may contribute to less future crime. Christopher Uggen and Jeff Manza, in “Voting and Subsequent Crime and Arrest: Evidence from a Community Sample,” forthcoming in *Columbia Human Rights Law Review*, state that “To the extent that felons begin to vote and participate as citizens in their communities, it seems likely that many will bring their behavior into line with the expectations of the citizen role, avoiding further contact with the criminal justice system.” Uggen and Manza “find consistent differences between voters and non-voters in rates of subsequent arrest, incarceration, and self-reported criminal behavior.” In the data they studied, between 1997 and 2000, 16% of non-voters were arrested, compared to 5% of voters. For persons with a prior arrest, the analysis of the data indicates that 27% of non-voters were rearrested, compared to 12% of voters.

Fiscal Year July 1 – June 30	Number of Applications	Monthly Average	# Civil Rights Restored	Percent Successful
1999 – 2000	NA	NA	679	NA
2000 – 2001	NA	NA	575	NA
2001 – 2002	NA	NA	1049	NA
2002 – 2003	1266	105	1231	97.2%
2003 – 2004	1171	98	626	53.4%
2004 - 2005	941	78	464	49.3%
July/August 2005	122	61	NA	NA

In 2001 our elected leaders enacted legislation, supported by the Catholic Conference of Kentucky, to increase the number of persons who had their voting rights restored by simplifying the application process. CCK supported this legislation because it advanced our faith’s belief in restorative justice and our view that persons who have completed serving their sentences should become full participating members of society, which includes the right to vote and the exercising of that right.

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Smorgasbord

Opportunities to deepen Christian involvement in matters of public life and help form a society that respects human dignity and human life. We encourage reprinting this page or portions of it in bulletins, diocesan newspapers, and any other means of communication.

STOP THE BULLYING NOW: The Catholic Conference is working with many other school and civic groups to enact legislation requiring local public school districts to have procedures in place to address bullying, harassment, and intimidation of students by other students. Bullying risks the safety of our children, reduces a child's opportunity to learn, and disrespects human dignity. We are collecting stories from persons whose children were bullies or whose children were bullied. We are especially interested in learning how teachers and other school officials dealt with these situations. If you have a story to tell, please contact us at the Catholic Conference by calling Father Delahanty at (502) 875-4345 or emailing him directly at patrickd@mis.net. Even if you do not have a story to tell, we welcome your help in passing this legislation. See below about signing up to become a Faithful Citizen Advocate.



FAITHFUL CITIZEN ADVOCACY: Please join the growing numbers of Kentucky Catholics who want to bring Gospel values and the teachings of our faith to bear on the public policy decisions of those elected to office. The Catholic Conference of KY monitors legislative proposals of State and Federal governments and sends alerts to Faithful Citizen Advocates so they can contact their elected representatives and ask them to support the Church's position on an issue. Visit www.ccky.org today and become a member. In addition to alerts CCK sends advocates copies of CCK's newsletter as well as press releases and statements of Kentucky's four bishops. It is free. Join today.

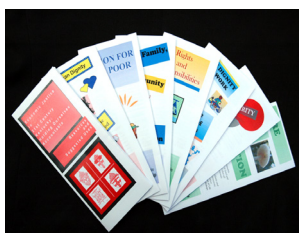
CATHOLICS @ the CAPITOL—February 21 and 22, 2006: Plan now to attend this year's exciting advocacy days in Frankfort. Last year more than 100 Faithful Citizen Advocates from parishes all over Kentucky brought the Gospel message to bear on legislation being considered by Kentucky's General Assembly. Our hope is that each parish send at least one representative to this important event. When you come, bring a carload of friends and family with you.

OCTOBER—RESPECT LIFE SUNDAY: Roe v. Wade: Questions and Answers, a one-page bulletin insert/flyer, gives people the facts about the current laws stemming from the 1973 Supreme Court case Roe v. Wade. It is written in a clear, easy-to-read question and answer format. Intended for distribution in parishes and Catholic organizations, Respect Life Sunday is an ideal time to download and distribute it in your parish. Visit www.usccb.org/publishing/RoeVWadeforweb.pdf.

CATHOLIC CAMPAIGN TO END THE DEATH PENALTY: Dale Recinella, author of *The Biblical Truth About America's Death Penalty*, and Catholic chaplain on Florida's death row, will speak in Louisville at Carmichaels Bookstore on Frankfort Avenue on Friday, October 21, 7pm. On October 22, he will speak at Belarmine University on Newburg Road at 1pm in the chapel of St. Mary of the Woods. For more information visit the website of the Kentucky Coalition to Abolish the Death Penalty of which CCK is a member: www.kcadp.org.



NATIONAL WEEKEND OF FAITH IN ACTION: Sponsored by Amnesty International USA, this action invites all faith communities to devote some time during the weekend of October 21–23 to the death penalty issue. Excellent resources to help you do this can be found at the Amnesty website: <http://www.amnestyusa.org/faithinaction/>.



CATHOLIC CONFERENCE OF KENTUCKY PUBLICATIONS: *Economic Justice in 21st Century Kentucky: Holding Ourselves Accountable* - This series of brochures constitute a pastoral letter from the Catholic Bishops of Kentucky. There are 8 brochures, 7 of which examine a major theme in Catholic social doctrine, and the 8th one is a resource brochure with suggestions for the use of the pastoral letter. You can order additional sets of these full color brochures, free. Call Karen at 502.875.4345 or email her at kchambers@ccky.org and let her know how many sets you need and where to send them.

ECUMENICAL BULLETIN INSERTS: The four diocesan Ecumenical Officers have written six articles which were distributed by Kentucky's Bishops affirming their commitment to ecumenism as articulated in the Vatican II's decree *Unitatis Redintegratio* and the teaching of our late Holy Father, Pope John Paul II, in his encyclical *Ut Unum Sint*. The Bishops encourage use of these bulletin inserts so that information on the church's teaching and practice in ecumenical matters may become better known in the Catholic Community. To read or download these articles visit <http://www.ccky.org/publications.htm>.

Additional materials for these and other life issues is available on the USCCB website at www.usccb.org/prolife/programs/rfp/rfp0506.htm

Catholic

Catholic health care is an important element of the health care delivery system that people in Kentucky rely on every day. Catholic hospitals and nursing facilities provide a range of services to Kentucky citizens, including inpatient and outpatient care, home health care, skilled nursing care, hospice care, low-income housing, psychiatric care and assisted living facilities.

Catholic health care in Kentucky¹ comprises:

- 17 acute care hospitals;
- 28 nursing facilities and other Catholic-sponsored service organizations including hospice, home health, assisted living, and senior housing.

Our Mission to Care

Catholic health care ministries have a long history of serving those in need and speaking for those whose voices often go unheard. Catholic health ministry is committed to providing quality health care to all people in our communities and to using the resources we have to the greatest community benefit. We are committed to serving those who have the least access to health care services and who are the most in need. Currently in this country there are 45 million uninsured individuals. In Kentucky alone there are 560,970 uninsured.²

Serving Poor Persons, Vulnerable Populations, Seniors³

Without Medicaid or Medicare, millions of low-income children, adults, people who are elderly, and people who are disabled would not be able to afford health care.

Catholic hospitals in Kentucky provided inpatient care to over 48,000 Medicare beneficiaries and to over 12,000 Medicaid beneficiaries in 2003. In 2003, Medicare paid for approximately 49 percent of those we served in Catholic hospitals, while Medicaid paid for 13 percent. In our Catholic sponsored long-term care facilities approximately 50% of our residents are Medicaid recipients and 10% are Medicare recipients. Many Catholic facilities provide significant charity care.

A Major Employer

Catholic health care provides a significant portion of the jobs in Kentucky. Collectively, over 14,000 citizens of Kentucky are employed by hospitals in the Catholic health ministry.

¹Includes Catholic, and other than Catholic facilities which are owned and operated by Catholic health systems.

²March 2003 Current Population Survey US Census Bureau.

³2003 American Hospital Association Annual Survey.

Health Care in Kentucky

A Commitment to Serve

Kentucky Catholic Hospitals

- Ashland**
1. Our Lady of Bellefonte Hospital
- Bardstown**
2. Flaget Memorial Hospital
- Berea**
3. Berea Hospital
- Covington**
4. St. Elizabeth Medical Center—North
- Edgewood**
5. St Elizabeth Medical Center—South
- Irvine**
6. Marcum & Wallace Memorial Hospital
- Lexington**
7. Continuing Care Hospital of CHI
St. Joseph Health Care Inc.
8. Saint Joseph Hospital
9. Saint Joseph Hospital East
- London**
10. Marymount Medical Center
- Louisville**
11. CARITAS Medical Center
12. CARITAS Peace Center
13. CARITAS In-Patient and Out-Patient Psychiatric Services
- Martin**
14. Our Lady of the Way Hospital
- Morehead**
15. St. Claire Regional Medical Center
- Paducah**
16. Lourdes Hospital
- Williamstown**
17. St. Elizabeth Medical Center Grant County

Kentucky Catholic Long-Term Care Facilities and Programs

- Bardstown**
1. CARITAS Home Care Services
- Covington**
2. St. Charles Care Center
- Flemingsburg**
3. St. Claire Home Care/Hospice/ Home Medical Equipment

- Fort Thomas**
4. Carmel Manor
- Frenchburg**
5. St. Claire Primary Care—Menifee County
- Louisville**

6. Franciscan Healthcare Center
7. Marian Home—Ursuline Sisters
8. Nazareth Home
9. Sacred Heart Village

Maple Mount

10. St. Joseph Villa

Melbourne

11. Holy Family Retirement Center

Morehead

12. St. Claire/UK Cancer Treatment Center
13. St. Claire HomeCare/Hospice/Palliative Care/ Home Medical Equipment
14. St. Claire Family Care

Mt. Sterling

15. St. Claire HomeCare/Hospice/ Home Medical Equipment

Nerinx

16. Loretto Motherhouse Infirmary

Olive Hill

17. St. Claire Primary Care—Carter County

Owensboro

18. Carmel Home

Owingsville

19. St. Claire Primary Care—Bath County

Paducah

20. McAuley Manor

21. Mercy Manor

Philpot

22. Bishop Soenneker Home

Sandy Hook

23. St. Claire Home Care/Hospice/ Home Medical Equipment

24. St. Claire Primary Care—Elliott County

St. Catharine

25. Sansbury Care Center

Vanceburg

26. St. Claire HomeCare/Hospice/ Home Medical Equipment

Versailles

27. Taylor Manor Nursing Home

Villa Hills

28. Madonna Manor, Inc.

Kentucky Catholic Health Care Systems

Ashland

Bon Secours Kentucky Health System

Covington

St. Elizabeth Health Partners

Erlanger

Catholic Health Initiatives

Paducah

Mercy Health Partners

Kentucky Catholic Sponsors of Health Care Programs

Covington

Carmelite Sisters for the Aged and Infirm
Germantown, NY

Carmelite Sisters of Divine Heart

St. Louis, MO

Sisters of Notre Dame Covington Province

Covington, KY

Louisville

Ursuline Sisters of the Immaculate Conception

Louisville, KY

Franciscan Sisters of Chicago

Lemont, IL

Melbourne

Sisters of Divine Providence of Kentucky

Melbourne, KY

Nazareth

Sisters of Charity of Nazareth

Nazareth, KY

St. Catharine

Dominican Sisters, Congregation of St. Catharine of Siena

St. Catharine, KY

Villa Hills

Benedictine Sisters

Villa Hills, KY

**Catholic Conference
Ecumenical Committee**

Covington

Rev. Ronald Ketteler

Lexington

Rev. Mr. Mark Stauffer

Louisville

Dr. Matthew Hayes

Owensboro

Rev. Tony Bickett
Rev. Michael Clark

Enlightened by faith and
guided by love, the CCK Ecumenical Committee seeks to:

- ◆ involve the whole Church, faithful and clergy alike, in promotion of spiritual ecumenism working toward unity among Catholics and among Christians;
- ◆ work with the Kentucky Council of Churches to increase ecumenical dialogue among leaders and members of the various churches and ecclesial communities;
- ◆ promote study leading to doctrinal understanding;
- ◆ and serve as instruments through which common action can be taken on matters related to social services and the formation of public policy.

The Sacrament of Baptism in an Ecumenical Context

By Rev. William Hammer

In his Letter to the Romans, St. Paul is writing to offer encouragement to Roman Christians to hold fast to their faith. Regarding their baptism, he asks rhetorically whether they remember, "we who were baptized into Christ Jesus were baptized into his death? Through baptism into his death we were buried with him, so that, just as Christ was raised from the dead by the glory of the Father, we too might live a new life." (Romans 6:3-4)

All Christians are incorporated into a life in Christ and into his Church through Baptism. Baptism creates a bond of unity between all Christians and Christ and among all Christians in Christ.

The 2003 revised *Ecumenical Handbook for the Roman Catholic Dioceses of Kentucky* offers our bishops' affirmation and encouragement to Catholics to build upon our shared foundation in the Christian faith: the waters of baptism. To give visible expression to the shared experience of being "baptized into Christ Jesus," there should be ceremonies and prayer services where Christians come together to renew their baptismal promises.

The 1993 *Directory for the Principles and Norms on Ecumenism*, (DAPNE) states that the Catholic Church recognizes as valid all baptisms "conferred with water and with a formula which clearly indicates that baptism is done in the name of the Father, Son, and Holy Spirit." (DAPNE n.93, see also Canon 849). The last 40 years of dialogue among members of the various Christian churches has produced much progress and theological agreement in understanding the significance, importance, and effects of baptism. One example is the 1982 ground breaking document, *Baptism, Eucharist and Ministry*, published by the Faith and Order Commission of the World Council of Churches. Vatican representatives also participated in its preparation.

Given our Catholic understanding of the nature of baptism and the permanence of the relationship created by being baptized into Christ Jesus, the Catholic Church never "re-baptizes" another validly baptized Christian who seeks membership in the Catholic Church. Acceptance of an already baptized candidate for full communion into the Catholic Church requires celebrating the sacrament of Reconciliation "at a time prior to and distinct from the celebration of the rite of reception" (Appendix iii, n. 36, U.S. edition of the *Rite of Christian Initiation of Adults*). For admission into the Catholic Church, there follows a profession of faith, and the celebration of the sacraments of Confirmation and

First Eucharist.

The Kentucky *Ecumenical Handbook* also offers guidance to parents who are in ecumenical or interchurch marriages and who are preparing for their child's baptism.

While there can be only one minister of Baptism, and that minister should be of the denomination into which the child will be baptized, the *Handbook* notes that "a minister of another Church or ecclesial Community (may) take part in the celebration" (n. 80). Thus ministers from both churches may share in the baptismal celebration of the child's "new life" in Christ. Another possibility for mutual recognition of the baptism would be for the child and parents to be recognized or welcomed by the faith community of the other Christian parent as an affirmation of the baptism on a subsequent Sunday.

Another question that arises for parents at the time of the baptism of their child concerns the choice of godparents or witness. Drawing from DAPNE, the *Ecumenical Handbook* explains that there is a distinction between a godparent/ sponsor and a witness. Godparents should be members of the Christian church into which the child will be baptized. This is so because they commit themselves to supporting parents in their duty of being good Christian parents and they represent the community of faith into which the child is being baptized (n. 81). Thus there must be at least one Catholic godparent at a baptism administered in the Catholic Church and other Christians may participate as witnesses. In recognition of the promise made by the witness to support the parents in the Christian faith development of the newly baptized child, "The names of such witnesses should be entered as such into the baptismal register" (n. 81). Conversely, "Catholics may act as witnesses at baptisms in other Churches or ecclesial communities" (n. 81).

The mutual recognition of baptism by most Christian churches offers a profound witness to the basic bond of unity that all the baptized share. Though our interchurch communion is still imperfect, Catholics are neither isolated from nor an independent organization from all other Christians. Though denominational differences are still significant in some matters and we live out our faith in a particular community, we must acknowledge that baptism by a particular church is simultaneously baptism into the universal Church. All Christians are called to nurture the faith and life of all our brothers and sisters in Christ and thereby live out an essential component of our ecumenical vocation.

Father Hammer is the former director of the Office of Ecumenism and Interreligious Relations for the Archdiocese of Louisville.

End of Life Decisions, Advance Directives

Visit the Conference website for the text of the Guidelines: www.ccky.org/publications.htm

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...it will be possible to make a correct judgment as to the means by studying the type of treatment to be used, its degree of complexity or risk, its cost and the possibilities of using it, and comparing these elements with the result that can be expected, taking into account the state of the sick person and his or her moral resources. (IV)

This passage highlights the inclusion of a necessary subjective component of deliberations about treatments, namely, "taking into account the state of the sick person and his or her moral resources."

The Declaration makes several clarifications to facilitate application of the general principles:

...one cannot impose on anyone the *obligation* to have recourse to a technique which is already in use but which carries a risk or is burdensome. Such a refusal is not the equivalent of suicide; on the contrary, it should be considered as an acceptance of the human condition, or a wish to avoid the application of a medical procedure disproportionate to the results that can be expected, or a desire not to impose excessive expense on the family or the community....

...When death is imminent in spite of the means used, it is permitted in conscience to take the decision to refuse forms of treatment that would only secure a precarious and burdensome prolongation of life, so long as the normal care due to the sick person in similar cases is not interrupted. In such circumstances the doctor has no reason to reproach himself with failing to help the person in danger....

When the moral duty to provide life-sustaining treatments ceases, the obligation to provide comfort and care may not be abandoned.

The Declaration notes that Christians should prepare for the event of death in the light of faith. Accordingly, Catholic spirituality integrates contemplation of and preparation for death as an aspect of a sound spiritual life.

Personal preparation for death should involve communicating with those nearest to us about our personal religious beliefs, values, and preferences concerning end-of-life decisions. Discussion of these matters can lighten the burden on loved ones in the trying moments of life and death decisions. This type of communication is especially important in view of a future situation when we might become incapacitated and lose decisional capacity.

Paradoxically, in spite of the blessings of medical progress, hi-tech medicine can intensify dilemmas at the end-of-life. While cure-oriented medicine may expand a life span, it will ultimately break down at the frontier of death.

In many instances, new dilemmas are being created. Ambiguities, anxieties and fears that arise about decisions concerning treatments and procedures which neither restore health nor improve functioning are becoming more commonplace. Families and physicians face hard decisions on whether to initiate or refuse ineffective and burdensome treatments that merely effect a fragile hold on life or prolong dying rather than living.

Who is responsible for life and death decisions?

Patients are the primary decision makers. Patients enjoy the right to make decisions, to initiate or refuse medical treatments as long as those decisions are in accordance with the moral law. The Catechism of the Catholic Church states that legitimate decisions to discontinue "medical procedures that are burdensome, dangerous, extraordinary, or disproportionate to the expected outcome" should be made by the patient, if competent. If the patient is not competent, these decisions can be made "by those legally entitled to act for the patient, whose reasonable and legitimate interests must always be respected." (CCC n. 2278)

In cases where patients have lost decision making capacity, assessing the intent and values of a given patient is imperative. But families often need guidance in this regard. Thus, the execution of an advance directive may serve as a helpful instrument for supporting the intent of patients and their beliefs and values in such circumstances as well as alleviating a burden placed on their families.

Where feasible, the Catholic Conference of Kentucky has recommended the health care surrogate form of advance directive as a more effective response to the complexity of the process entailed in decisions about treatment options. The designation of a proxy decision maker may more realistically secure appropriate personal interaction with health care providers in the real life setting of clinical options. This approach approximates better the need for meeting the demands for informed consent.

The Guidelines published by the Catholic Conference provide spiritual and moral considerations on death and life issues and principles applicable to executing advance directives available in Kentucky law. The Living Will Directive and Health Care Surrogate Designation statutes were passed by the Kentucky legislature in 1994.

On November 12, 2004, Pope John Paul II addressed the need for comfort or palliative care for the dying. He observed: "The refusal of *aggressive treatment* is neither a rejection of the patient nor of his or her life. Indeed, the object of the decision on whether to begin or to continue treatment has nothing to do with the value of the patient's life, but whether such medical intervention is beneficial for the patient."

In asserting the moral responsibility for palliative care for the dying, the late Holy Father identified the provision of acts and attention "to lessen their suffering in the last part of their earthly existence and to encourage a life as peaceful as possible, which will dispose to prepare their souls for the encounter with the heavenly Father." ["To the Participants in the 19th International Conference of the Council for pastoral Health Care". (November 12, 2004)]

There comes a time in life when treatment is ineffective or burdensome. There comes a time when, in the words of Pope John Paul II, the possible decision "either not to start or to halt a treatment will be deemed ethically correct if the treatment is ineffective or obviously disproportionate to the aims of sustaining life or recovering health."

There comes a moment when compassionate care and love for the dying, company and presence with the dying, become the "best treatment."

Restore Right to Vote

Continued from page 2

This change in law has not ensured restoration of the right to vote. The chart on page 2, prepared from data available from the Office of Secretary of State Trey Grayson and from the Kentucky Department of Corrections, makes clear that Kentucky is headed in the wrong direction in restoring the right to vote to ex-felons.

Fewer people in Kentucky are applying to have their rights restored, fewer people are having their rights restored and a lower percentage of those applying are having their request granted.

Under Kentucky's Constitution, a Governor has the constitutional right to exercise discretion for any or no reason. The current administration believes that the rule of law would be undermined if there were no process upon which to base the Governor's decision. The current administration reports that some prosecutors who had never before recommended restoration of voting rights have now recommended restoration for some ex-felons.

The majority of Americans want ex-felons to be able to vote as is indicated by the July 2002 national telephone survey conducted by Harris Interactive. (See: www.soc.umn.edu/~uggen/Manza_Brooks_Uggen_POQ_04.pdf.)

CCK will work to modernize the Kentucky Constitution so that after a person convicted of a felony completes a sentence, his or her right to vote and participate in society is restored automatically. This approach avoids anyone claiming the arbitrary use of the discretionary power. Indeed, it provides certainty and predictability. It encourages participation in the community, promotes democracy, and welcomes our prodigal sons and daughters back.

Opportunities for Life Ministry Needs your Help

Volunteer Opportunities and Training Available

Courtney had an unplanned pregnancy when she was 17. She chose to make an adoption plan for her son, rather than put herself through the horror of an abortion. In light of her own experience, Courtney felt called by God to serve other young women and now ministers 15 hours per month as an OFL volunteer.

Opportunities for Life (OFL), a ministry of the four Catholic Bishops of Kentucky, is excited to offer four trainings during the fall of 2005 for new volunteers. With the help of the diocesan Catholic Charities and Pro-Life programs, OFL will provide new volunteer trainings in Owensboro at the Catholic Pastoral Center, Louisville's Flaget Center, and the Lexington parish of Christ the King. The training in the diocese of Covington will be announced later.

The most important quality of an OFL volunteer is a desire to serve abortion-vulnerable women with a heart of compassion and love. God might be calling you to help women statewide, 24 hours every day of the year, in a variety of blessed ways. You can volunteer to:

- ✓ Staff our statewide pregnancy helpline for 15 hours a month from your home offering pregnancy and abortion information to callers and referring them to their local pregnancy support services.
- ✓ Be a part of our statewide prayer network, which is essential to our ministry.
- ✓ Be an OFL community volunteer who educates their local community about our ministry and fosters support for our work.

If you have a heart to serve abortion-vulnerable women and their babies, 15 hours per month to volunteer, and the capacity to attend a diocesan training for 12 hours, we'd love to have your help. The ministry of OFL has blessed *Courtney* and enriched her life with God's grace. It will do the same for you. Call (502) 223-5330 today and be a part of advancing the Culture of Love, one woman at a time.

Opportunities For Life
Kentucky's Pregnancy
Hotline
1-800-822-5824



**CATHOLIC
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