

EIR Feature

Euthanasia returns . . . as economic policy

by Nancy Spannaus

President Ronald Reagan is probably among the last people in the United States who would consider himself an advocate of the Nazi policy of euthanasia. Morally, he thinks of himself as “pro-life.” Yet, through his assiduous application of the “free market,” this “moral” President has opened the floodgates to the revival of this murderous practice against thousands, if not hundreds of thousands, of our citizens.

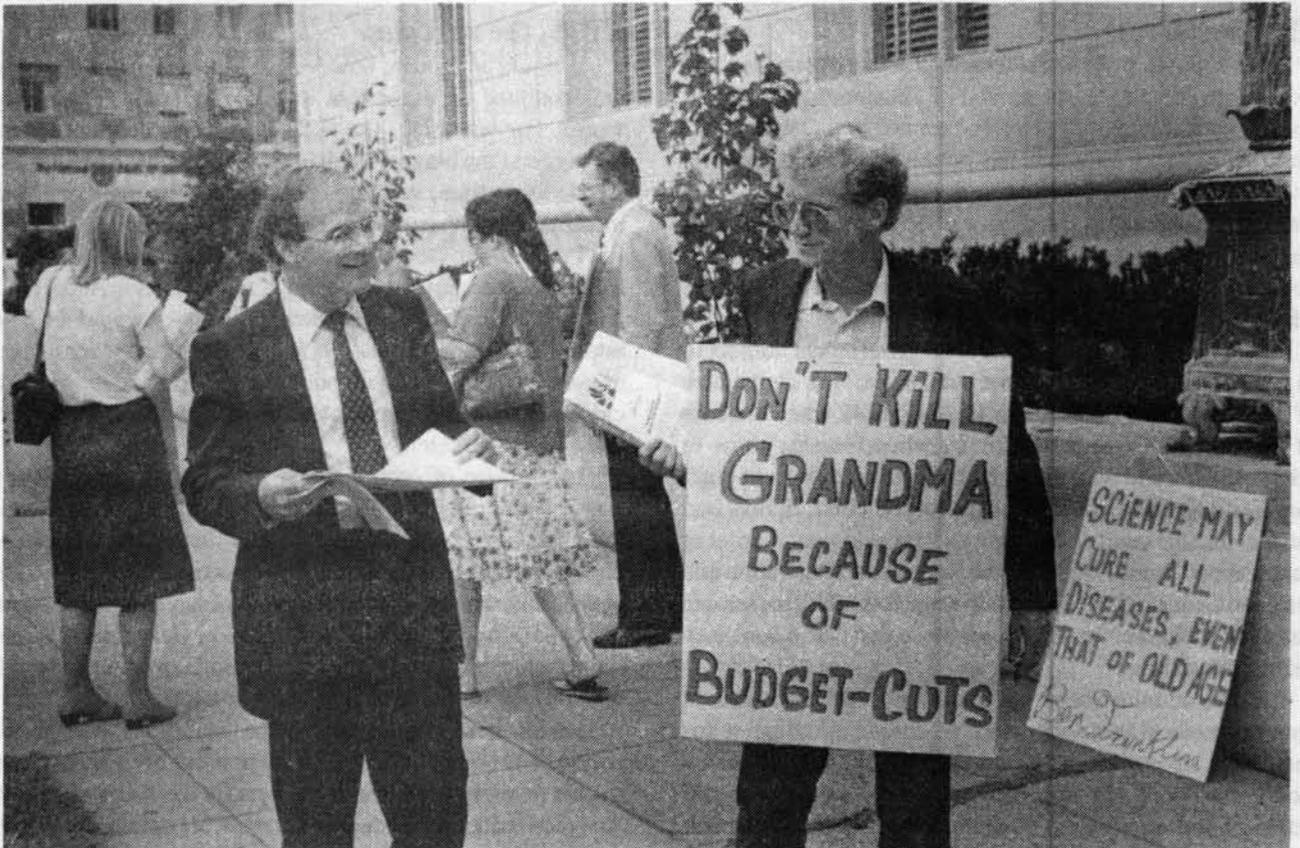
By euthanasia, I mean the deliberate killing of an individual because it has been decided that death would be “good” for him or her, “better” than the continuation of life itself. Within the Judeo-Christian tradition, there is no such decision possible: Life is always to be chosen above death. Pagan religions, however, from the days of Sparta to the Nazi regime, condone the practice on the theory that there are classes of “inferior” individuals who do not deserve to claim society’s resources in order to live.

Many individuals, however, have become “convinced” of the pagan argument, not on a moral basis, but through a pragmatic adaptation to a perceived scarcity of resources. What they have failed to anticipate, is that the acceptance of the austerity economics in a few “exceptional” cases, will ultimately lead to its perceived necessity in many more. The acceptance of an immoral economics—in which the government does not provide the conditions for prosperity for all—will lead to the most hideous personal immorality, including mass killings of people considered “useless eaters,” whom the society cannot afford.

Thus, President Reagan’s promotion of a free-enterprise economics which sacrifices productive industry to the speculative greed of the international financiers, and leaves the majority of the working population in the United States, not to mention the rest of the world, in increasing misery, is responsible for creating the conditions for euthanasia.

‘The invisible hand’

No one can possibly know how many senior citizens have been “terminated” in nursing homes, or handicapped young people smothered or starved to death



Activists from the National Democratic Policy Committee demonstrate against a televised conference on euthanasia in Washington, D.C.

over the last years in the Western European countries. No one would want to be caught keeping the statistics. But by looking at the traces of just those cases in which individuals have asked for legal sanction to such actions, we can observe the way in which such practices are becoming increasingly accepted, and codified in our legal institutions.

For the most part these legal decisions have occurred on the state level, apparently initiated by families who just can't afford to keep their failing relatives alive. Behind the scenes, however, we can detect the influence of national and supra-national organizations, such as the Society for the Right to Die, which are funding and promoting these legal initiatives, for the purpose of establishing legal precedents. Even more invisible and pervasive, is the hand of international finance, such as the insurance companies, which have decreed increasing limits on medical services in the interest of "cost efficiency."

The first of the legal precedents occurred in "extreme" cases of long-term comatose individuals, cases where it would appear "reasonable" to "pull the plug." But the courts have gone a long way since the Karen Ann Quinlan case. Since the spring of 1984, when *EIR* did its last survey of the euthanasia movement, the courts have moved from sanctioning

the removal of "extraordinary life-saving equipment" from elderly patients judged to be within a year of death, to a consistent policy of recommending removal of food and water—death by starvation—for a broad range of seriously handicapped individuals.

The first cases tended to hinge very heavily on the expressed "desire" of the individual, at some time in the past, to be spared painful continuation of life by machines, should he or she ever become so dependent. But, during the course of the last two and a half years, numerous states have moved into authorizing not only families, but also state officials, to make decisions as to whether it is "worthwhile" to keep individuals alive. Increasingly, there is no pretense of providing evidence that the individual to be killed, had wanted to be so.

And, as one state precedent is piled up after another, these cases become the "evidence" for the next, even more liberal, application of euthanasia.

The most blatant exploiter of these cases is the Hemlock Society, part of the Worldwide Federation of Euthanasia Societies, which seeks a fundamental shift in U.S. criminal legislation, in order to permit both suicide and "assisted suicide"—i.e., murder.

The federal role

This is not to say that the federal government has not had a direct role to play in the spread of euthanasia, beyond its general economic policy. Health care policy under Gramm-Rudman austerity strictures has not beaten around the bush on the question of recommending denial of "expensive" medical care to the elderly and poor. Secretary of Health and Human Services Otis Bowen has testified repeatedly that the government just can't afford to provide health care to all those who need it.

The one area in which the federal government attempted to take a positive action against euthanasia, was on the care of handicapped infants. It was in April 1982 when the case of a child with Down's Syndrome, whose parents chose to withhold food and water despite the fact that dozens of other families wanted to adopt and care for the child, dramatized the fact that the courts and hospitals were allowing murder of handicapped youth. Initially, the Reagan administration and Surgeon General C. Everett Koop acted forcefully to threaten cutoff of all federal funds to hospitals which carried out such barbaric practices.

But the administration ran into immediate opposition in both the medical profession and the courts. Although it appealed the adverse decisions all the way up to the Supreme Court, that body, in June 1986, took the unconscionable action of striking down the federal government's argument that handicapped infants deserved federal government protection, even if the parents had decided that they should die.

Such a Supreme Court decision opposes the fundamental principles of our Constitution and the God-given natural law on which it is based. Parents are not "free" to kill their children if they wish, just as we as a people are not "free" to legalize suicide, or kill our sick. Given such a situation, it was incumbent on the administration to proceed with the correct policy, mustering new legal arguments and new statutes, if necessary, in order to have their lifesaving actions sanctioned by the Court.

Since the Court refused to provide a defense against murder for handicapped children, it is not surprising that it failed in the more recent case brought before it, the case of Nancy Ellen Jobes. Jobes, a woman in her thirties, who was not comatose or unresponsive, was condemned to death by starvation and dehydration by the New Jersey Supreme Court, which was asked to sanction this execution by her family and "advisers" from the Right to Die lobby. When the hospital and the state guardian for Jobes appealed to the Supreme Court, the justices all refused to consider the case.

As long as the U.S. Supreme Court, as the final arbiter of our Constitution, refuses to protect the helpless from euthanasia, it is not necessary that the federal government pass legislation like that in Nazi Germany, which set up programs for murdering the "worthless eaters." By abstaining from defending life, while imposing austerity economics, our government will be the chief promoter of death.

AIDS, the next step

It would be foolish, however, to assume that the situation will continue as is, or that it will only get incrementally worse. For one thing, the U.S. and world economy are on the verge of the biggest crash of financial values in centuries. At the same time, we are about to incur the most dramatic increase in health care costs that our nation has ever seen.

I refer to the fact that, under current government policy, the AIDS pandemic is expanding out of control. At present, AIDS is still visibly concentrated in the drug addict and homosexual populations. It is also beginning to reach a level of concentration in certain poor ghetto populations, where it can be expected to spread at an increasing rate into the heterosexual population.

In the face of such a threat, the federal government's policy continues to be: Don't spend any money! Local facilities that have been set up to deal with AIDS patients are already at, or near, bankruptcy. The Reagan administration even thinks that mass testing is too expensive, not to mention the expansion of ground-breaking biological research programs which is required if a breakthrough in the understanding and cure of the virus is to be achieved.

Under these circumstances, the conditions are ripe for widespread acceptance of the mass practice of euthanasia, on a scale much beyond that carried out by the Nazis. Already, "hospice" care is considered an acceptable option. In reality, that means no medical care, while AIDS patients are left to die.

But it won't end there. Increasingly, AIDS patients, or individuals from non-white communities where AIDS is known to be rife, will be met with fascist hostility by a population terrified that it will be the next victim. There are indications that violence against suspected homosexual or drug-using AIDS carriers is already rising dramatically in places such as New York City. Having refused to take sound public health measures against the AIDS virus, the government will reap the cost of social violence instead.

Under these conditions, it will soon be impossible for people to fool themselves that "hospices" represent any kind of medical care. So-called medical centers for AIDS patients will increasingly turn into killing centers, where the victims are starved and dehydrated to death. If such a practice can be condoned to be carried out against our grandmothers and grandfathers, how much more likely is it to be done to those suffering from a 100% fatal disease, which the government has refused to spend the money to conquer?

As of now, we still have a choice. We can change our economic policy to be in line with the Judeo-Christian ethic of the sanctity of the individual human life, before the horrors of a Dark Age come upon us. The alternative is bestiality, of which the following documentation is just a small foretaste.

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