

SENATE CONCURRENT RESOLUTION NO. 11

A CONCURRENT RESOLUTION, Opposing physician-assisted suicide.

WHEREAS, South Dakota has an unqualified interest in the preservation of human life and this state's prohibition on assisted suicide, like all homicide laws, both reflects and advances its commitment to this; and

WHEREAS, neither the South Dakota Constitution nor the Constitution of the United States contains a right to assisted suicide, and, thus, no individual has the right to authorize another to kill that individual in violation of federal and state criminal laws; and

WHEREAS, suicide is not a typical reaction to an acute problem or life circumstance, and many individuals who contemplate suicide, including the terminally ill, suffer from treatable mental disorders, most commonly clinical depression, which often goes undiagnosed and untreated by physicians; and

WHEREAS, in Oregon, forty-six percent of patients seeking assisted suicide changed their minds when their physicians intervened and appropriately addressed suicidal ideations by treating their pain, depression, and any other medical problems; and

WHEREAS, palliative care continues to improve and is nearly always successful in relieving pain and allowing a person to die naturally, comfortably, and in a dignified manner without a change in the law; and

WHEREAS, the experiences in Oregon and the Netherlands explicitly demonstrate that palliative care options deteriorate with the legalization of physician-assisted suicide; and

WHEREAS, South Dakota rejects abuses of palliative care through futility care protocols and the use of terminal sedation without life-sustaining care as seen in the Liverpool Care Pathway; and

WHEREAS, a physician's recommendation for assisted suicide relies on the physician's judgment, including any prejudices and negative perceptions that a patient's life is not worth living, ultimately contributing to the use of futility care protocols and euthanasia; and

WHEREAS, South Dakota rejects the sliding-scale approach which claims certain qualities of life are not worthy of equal legal protection; and

WHEREAS, the legalization of assisted suicide sends a message that suicide is a socially

acceptable response to aging, terminal illnesses, disabilities, and depression, and subsequently imposes a duty to die; and

WHEREAS, the medical profession as a whole opposes physician-assisted suicide because it is contrary to the medical profession's role as healer and undermines the physician-patient relationship; and

WHEREAS, assisted suicide is significantly less expensive than other care options, and Oregon's experience demonstrates that cost constraints can create financial incentives to limit care and offer assisted suicide; and

WHEREAS, as evidenced in Oregon, the private nature of end-of-life decisions makes it virtually impossible to police a physician's behavior to prevent abuses, making any number of safeguards insufficient; and

WHEREAS, a prohibition on assisted suicide, specifically physician-assisted suicide, is the only way to protect vulnerable citizens from coerced suicide and euthanasia:

NOW, THEREFORE, BE IT RESOLVED, by the Senate of the Ninety-Second Legislature of the State of South Dakota, the House of Representatives concurring therein, that the Legislature strongly opposes and condemns physician-assisted suicide because the Legislature has an unqualified interest in the preservation of human life, and because anything less than a prohibition leads to foreseeable abuses and eventually to euthanasia by devaluing human life, particularly the lives of the terminally ill, elderly, disabled, and depressed whose lives are of no less value or quality than any other citizen of this state; and

BE IT FURTHER RESOLVED, that the Legislature strongly opposes and condemns physician-assisted suicide even for terminally ill, mentally competent adults because assisted suicide eviscerates efforts to prevent the self-destructive act of suicide and hinders progress in effective physician interventions including diagnosing and treating depression, managing pain, and providing palliative and hospice care; and

BE IT FURTHER RESOLVED, that the Legislature strongly opposes and condemns physician-assisted suicide because assisted suicide undermines the integrity and ethics of the medical profession, subverts a physician's role as healer, and compromises the physician-patient relationship; and

BE IT FURTHER RESOLVED, that the secretary of the Senate transmit a copy of this resolution

to the Governor, the South Dakota Department of Health, the South Dakota Department of Human Services, and the South Dakota State Medical Association.

Adopted by the Senate,  
Concurred in by the House of Representatives,

February 8, 2017  
February 13, 2017

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Matt Michels  
President of the Senate

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Kay Johnson  
Secretary of the Senate

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G. Mark Mickelson  
Speaker of the House

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Arlene Kvislen  
Chief Clerk of the House