

California aid-in-dying law concerns some Latinos, blacks

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In this Jan. 14, 2014 file photo, Los Angeles Archbishop Jose Gomez makes the keynote speech at a Town Hall Los Angeles forum in Los Angeles. Largely Latino California has become the first majority-minority state to allow the terminally ill to hasten their deaths, the biggest test yet to the end-of-life choice that has raised concerns by communities of color. Gomez said that "poor families, African Americans, Latinos and immigrants"? when facing a terminal or serious illness will be at risk of coming under pressure to take lethal drugs in the face of high medical costs. (AP Photo/Nick Ut, File)



California on Thursday becomes the latest state to allow the terminally ill to legally choose to end their lives, raising worries among some people in the state's large Latino and African-American communities that poor people with serious illnesses could be pressured to take lethal drugs as a cheaper option to long-term care.

California is far more diverse than the other states where the option is available—Washington, Vermont, Montana and Oregon, the first to adopt the law in 1997.

Of the 991 terminally ill people who have decided to take life-ending drugs in Oregon, most have been white, over 65 and well educated, according to a February report from the Oregon Health Authority.

This spring, the national right-to-die advocacy organization, Compassion & Choices, named Latina, African American and Filipina-American women to reach out to minority communities. The group also set up a bilingual hotline explaining the law and held meetings in largely Spanish-speaking areas such as California's Central Valley.

"We knew we would need to learn to talk about the issue around death and dying in a way that was not just recognizable to the white community," said Toni Broaddus of Compassion & Choices.

In an April 14 column in the Chicago Tribune, cancer patient Miguel Carrasquillo called on his fellow Latinos to "break the cultural taboo of discussing death and medical aid in dying."

He called himself the "Latino Brittany Maynard," a reference to the 29-year-old California woman who was dying of brain cancer when she moved to Oregon to access the lethal drugs in 2014. Her story galvanized support for the proposal that became the California law.



Carrasquillo's mother supported his fight for the option, but his father saw it as intervening in God's work.

Carrasquillo died Sunday of cancer in his native Puerto Rico, lacking the funds to move to a state with a right-to-die law. His mother promised him she would keep pushing for the practice so others do not have to suffer as he did.

Compassion & Choices hopes its efforts will help lift barriers that have blocked legislation in other states. The group is working with African American clergy in Maryland, where such a bill failed earlier this year largely because of concern by minority leaders.

Advocates also have been reaching out to Puerto Ricans in New York, where lawmakers will be closely watching what happens in California.

The Roman Catholic Church has called right-to-die laws bad policy.

Los Angeles Archbishop Jose Gomez has warned that poor families, African Americans, Latinos and immigrants with a serious illness will be at risk of coming under pressure to take lethal drugs to avoid the high cost of cancer medications and other care along with insurance practices that limit hospice care.

California has more safeguards than other states. Before a doctor can prescribe lethal drugs, a patient 18 or older must make two oral and one written request. The law also requires a diagnosis that the person has less than six months to live and that the person can take the drugs without help from anyone.

Life-ending drugs will be covered under MediCal, the state's public insurance plan, but it limits coverage of outpatient palliative care consultations unless the person has stage IV cancer.



"California, unlike Oregon, is not a lily-white state," said Dr. Aaron Kheriaty, director of the medical ethics program at the University of California Irvine School of Medicine. "Because of California's ethnic and cultural diversity, we cannot ignore these economic and social realities and pretend that this option merely enhances everyone's choices."

The National Council of La Raza has not publicly taken a stance and declined to comment on the new law.

Still, Compassion & Choices sees the conversation starting.

"If you come from a family grounded in a culture that doesn't talk about death, they don't talk this through, which is what we're trying to get people to do," Broaddus said. "It's about having the conversation. It doesn't matter what your color skin is, what God you believe in, this is a very individual, profoundly personal moment."

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