



HEALTHY  
I Was Bullied Into  
Having a C-Section

## ISSUES

# My Partner Used Assisted Suicide to End Her Life and I Wouldn't Change A Thing, So How About We All Just Leave Brittany Maynard Alone

I knew Heather was ready for it all to be over. And although assisted suicide wouldn't have been my choice, it wasn't mine to make.

KELLI DUNHAM · OCT 30, 2014

On February 13, 2007, Heather MacAllister, the woman I called my Queen was -- in her words -- "tired and done" from a six-year fight with ovarian cancer. She used the provisions of the Oregon Death with Dignity Act to hasten the end of her own life by consuming a huge bowl of chocolate pudding full of a lethal dose of barbiturates.

You might have already guessed that because of the way my partner died, chocolate pudding has become an extremely complicated snack for me.

Even now, occasionally when a friend suggests I help myself to a beverage in their refrigerator, I will open the door and the friend, remembering the container of Kozy Shack on the top shelf, will panic. They will then throw themselves across the room and into what they presume to be harm's way, like a bodyguard taking a bullet for their charge, perhaps with a protracted but silent "noooooo" formed on their lips.

I really appreciate the effort.

The problem isn't so much that I can't be around chocolate pudding; in fact I consumed a container of Kozy Shack less than six weeks after she died because I had no intention of letting chocolate pudding be the boss of me. And also, chocolate pudding is delicious. Maybe if Heather had eaten deadly brussel sprouts it would have been less of a priority in my emotional recovery.

The problem is that now chocolate pudding has become an objective correlative, a symbol of a Death That Dares Not Speak Its Name.

Heather hadn't sprung the assisted suicide thing on me last minute. In fact, a few years before she died, she made sure I was on board. During my last visit before I moved from Philadelphia to Oregon to close the distance in our long distance relationship, she had taken my hand while we sat in a friend's garden.

“Before you come out I need you to understand, I don't know how long I have. If it gets to the point where the pain or the nausea is too bad, I'm going to take my own life. I want control of this. I need to know the people closest to me aren't going to oppose me.”

Hoping that my voice was a little steadier than I actually felt, I said, “Yup, my Queen, I got it.” Heather knew what she wanted, and after an eight week stint of unremitting nausea the previous fall, she knew she didn't want to suffer like that if there was no hope she could get better.

And so then, we continued to live life together the best we could.

Some days were amazing: we had sex and we walked hand in the hand in Portland rain and we snuggled in bed watching classic sketch comedy and she tried -- hilariously and unsuccessfully -- to teach me [how to dance](#).

Other days were more difficult: she went to chemo, she threw up, I tried to cook for her, she threw up what I cooked.

And then there were days that have sunk so deep into my body that sometimes they wake me from a sound sleep, feeling the same hopelessness and terror I felt then. Heather had unremitting searing pain that continued even when we were giving her intravenous pain medication around the clock. She was unable to eat and still dry heaved uncontrollably; many nights we were up until sunrise, sometimes with the hospice nurses present, trying to get her symptoms under control.

Heather had already begun the paperwork to obtain the meds to help her hasten her death if she got to that point. One night in early February, I was sleeping curled up beside her when I heard her talking on the phone.

“Yeah, you better get here as quick as you can. I've had enough. I'm doing it tomorrow.” I waited until she finished the phone call and then poked her with the very tip of my pinkie.

“Hey, my Queen,” I said, continuing to poke her lightly, “when a person decides they are going to use assisted suicide to hasten their death, they're supposed to tell the person sleeping beside them before they start telling the world.”

“Ooooh that’s right,” she said, almost mocking me, “I’m sorry. I forgot that was the procedure.”

And then she kissed me, open-mouthed, for a moment and we got up to make plans.

By that Tuesday at 7:30 a.m., everything was in place. Heather wanted to die surrounded by the people who loved her. It felt like half of Portland was at our house; a bright yellow barely-converted Hare Krishna Temple. Joining us were Heather’s best friends, one of whom had flown in from Michigan, another wearing thigh high boots for the occasion; a half dozen ex-lovers/current friends; Heather’s massage therapist, a ’70s-era lesbian who talked about organic kale and asked if our cat wanted energy work. A group of radical faeries visited and left the house smelling like patchouli and body odor. Heather’s biological sisters had traveled to join us and they completed the circle. It felt good -- if a little surreal -- to have us all acting together as family.

The assisted suicide liaison was sitting on our couch surrounded by forms. She made conversation with our gathered tribe as she sifted through the paperwork, sitting primly with her legs crossed in her Ann Taylor suit. She looked as if this was all very customary and in that in fact, this was the fourth barely converted Hare Krishna Temple she had been to that day.

At Heather’s request, I administered the anti-nausea drugs through her central IV port that she would need to keep down the assisted suicide meds. As I drew up the dose, I tried to sing her a goofy song but found my voice as well as my hands were shaking.

“You know you’re doing that for yourself, right?” she said. “You know I’m okay?”

I did. I knew Heather was ready for it all to be over. And although assisted suicide wouldn’t have been my choice, it wasn’t my choice to make.

Heather’s best friend’s partner had bravely offered to mix up the lethal dose of medication that Heather had been prescribed. She swirled the white powder into Heather’s requested medium, Kozy Shack chocolate pudding.

She took the bowl in to Heather.

Heather ate the pudding.

She died.

It was horrible and it was beautiful and it sucked and even though Heather had no desire to die, she did have every desire to control as much of the process as possible. Our participation was the last gift we could give her. It was not an inexpensive gift and yet I am 100 percent sure I made the right decision.

Since the video was released that features 29-year-old Brittany Maynard speaking about her decision to use assisted suicide to hasten her own death from brain cancer, *The Death That Dares Not Speak Its Name* has become the *Death That Everyone Has An Opinion About*.

The most common charge leveled against Maynard is that she is selfish for making her family be a part of her decision. Even if that's true, um, so what? We can agree the people who love you will bend to your wishes on your birthday, or no child would ever have turned five at Chuck E Cheese. Yet when we're looking the grim reaper straight up the nostrils somehow that's the day we have to be considering the wishes and feelings of everyone else?

I do understand that Maynard has volunteered, in a sense, to be a part of the conversation by releasing the video and enlisting with the [Compassion & Choices](#) campaign. And I, frankly, am no unabashed cheerleader for assisted suicide. I have the reservations any thinking person has, and of course I worry about it being leveraged in a way that makes society's most vulnerable people even more vulnerable.

Yet it was so very much what Heather wanted that I really can't imagine her life ending any other way. Unlike the majority of the Internet's armchair medical ethicists, I don't have the luxury of anything but ambivalence because I've seen it all very close up.

But beyond what any of us might do to inform ourselves so we can advocate for appropriate policy decisions, I believe this is mostly an elaborate smokescreen obscuring the real issue.

The actual difficulty is that I'm going to die and you're going to die and everyone we know is going to die and no one wants to think about it.

It's really no fun to be creatures that have evolved to the point where we're conscious of our demise. But we're talking about Maynard's death because we're too chickenshit to talk about our own, even though talking about our own deaths is the only way to make them anything like bearable for ourselves and the people we love.

So here's a zany idea: Have a conversation about death -- your death -- with the people you are closest to. [Discuss what you want to happen if you can't make decisions yourself](#). Educate yourself about different end of life options, about measures you might want taken if you were very injured or very ill. Talk with your parents about what they want. If you don't want your closest relative making medical decisions for you in case you are not able to, appoint a health care proxy.

Just start a conversation. You don't even have to finish it.

Because we're all going on this journey whether we like it or not, and whether we talk about it for not. And we don't have perfect control over how it happens, but we have some control, whether we die in an ICU unit, or a hospice or at home or even if you sail out from a barely converted Hare Krishna Temple on a raft of chocolate pudding.

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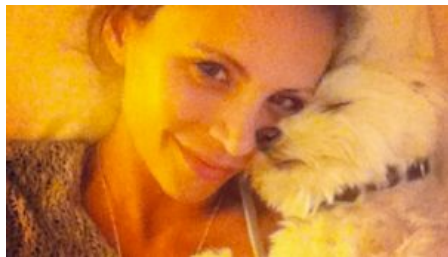
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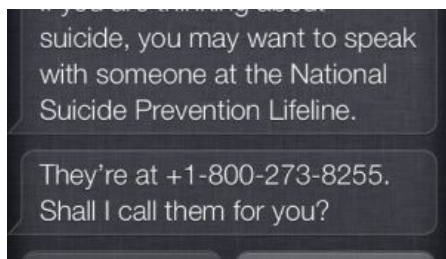
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