

The California legislature passed a “right to die” bill last week and sent it to the Governor’s desk. If the legislation becomes law, California will join a handful of other states in permitting what is euphemistically known as “death with dignity” or “assisted suicide.”

When this news is added to recent troubling information about Planned Parenthood’s profiting from the sale of the body parts of aborted infants, and when that is added to our cultural debates about abortion in general, about gun violence, and about the death penalty, I’ve been struck by what seems to be a growing “Culture of Death” in these United States.

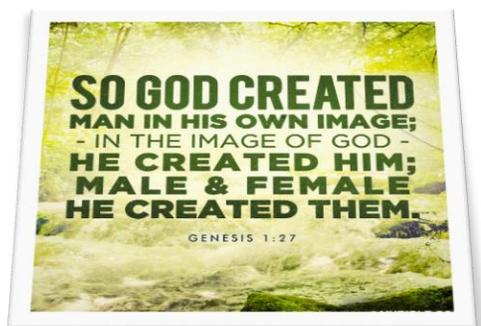


Christians, of course, are by no means of one mind about any of these issues, and while we have every right to try to influence the laws of the land, we do not have the right to expect those who do not share our beliefs to live by our value systems beyond whatever the mutually-agreed-on law requires. Nor do I have any particular or unusual wisdom about these matters. I have, however, spent nearly fifty years thinking about them, and I’m going to try to summarize some of what I think in what follows.

What follows is not going to be an infallible word from God. Sin and self-interest cloud my understanding just as they do yours. You don’t have to agree with me. The challenge we all face is to study the Bible with serious intellectual and spiritual purpose, talking through issues with each other in a spirit of love, and recognizing that our unity comes from common allegiance to the Lord Jesus Christ and from genuine love for each other, even when we see things differently.

Our purpose is not to pass judgment on one another, or on anybody else. Our purpose is to discover as best we can the road that leads to Abundant Life (John 10:10) and to follow that road, wherever it takes us.

For starters, the Bible begins with the affirmation that “*God created mankind in his own image, in the image of God he created them; male and female he created them*” (Genesis 1:27). As the biblical story unfolds, it tells us that the whole purpose of our lives on this earth is to enable and to fully develop the image of God that has been planted within us from the moment of our creation.



It is this divine potential that gives human life its unique value. Human life is sacred because it is created “*in the image of God,*” with the potential to become an access point through which God brings in the New Creation. Not all human lives actually become such access points, but every human life has this possibility.

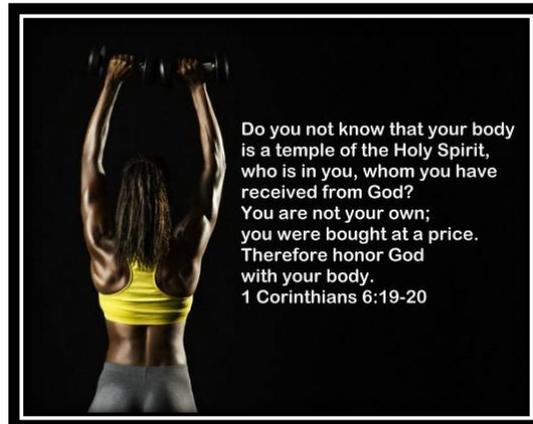
God grants to every human person the privilege of physical life that possesses eternal spiritual potential, and it is this potential of which the Sixth Commandment speaks when it tells us, “*You shall not murder*” (Exodus 20:13). This Commandment is stated negatively, in terms of what we are *not* to do, but it’s crucial to remember that the point of this Commandment is not *prohibition* so much as

affirmation. The Sixth Commandment is about the sacred value of human life,¹ which also has implications for our appreciation of the process and joy of *living* (Deuteronomy 8:10). And so we begin

Deeply-rooted faith in God, nurtured by a life of Christ-honoring service through the power of the Spirit, tends to diminish—if not quite remove—our fear of death. At the same time, many Christians experience a certain degree of anxiety, fear, and even terror when contemplating the pain and suffering that often accompany our transition from this life to the next, and in this, we are not alone. Our culture is terrified of suffering.

One of the most important biblical texts that bears on the issues of suicide, assisted suicide, and euthanasia (“mercy killing”), is this one: “*Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore honor God with your bodies*” (1 Corinthians 6:19-20).

While these twin texts of “*the image of God*” and “*your bodies are temples of the Holy Spirit*” must certainly guide our consideration of these moral questions, the precise guidance they offer is not overwhelmingly clear. For example, one of the major arguments presented against assisted suicide and euthanasia is that in such action we are usurping God’s prerogative of determining the length of our lives.



While that may be true so far as it goes, were we perfectly consistent in pursuing that principle, we wouldn’t do anything to prolong life, either, which would put all of the healing arts out of business and end most of our lives in fairly short order. (Can you imagine how many times over you would already be dead were it not for antibiotics?)

I’ve been interested this afternoon to reread a paper I wrote in college and to be reminded of the conclusions to which I came as a know-it-all college sophomore:

“Human life is sacred when and if it is at least *capable* of fulfilling its ultimate goal—right relationships with God and man[kind]. When decisions must be made concerning the life and death of human beings, this capability must be considered, as well as the question of whether the contemplated action will help or hinder the person involved as he [or she] tries to achieve personhood.”²

“When the person is not in complete possession of his [or her] faculties, such a request must, of course, be denied. However, if it is a rational request for death in the face of a terminal illness with intractable pain, it should be realized that such suffering can be

¹ Originally, of course, from Creation through the Flood (Genesis 1:1 to Genesis 9:3), all animal life was to be regarded as sacred and killing animals was forbidden. Even after God began to allow the killing of animals for food, the blood was to be regarded as a sacred token of the fact that all life comes from God and belongs to God (Genesis 9:4).

² David C. Stancil, “Abortion and Euthanasia: The Morality of Legalization,” a paper presented to Professor Lloyd Birch at Georgetown College, April 1970, 52.

a demoralizing, dehumanizing, and degrading experience at least as often as it can be a 'saint-producing' one, and that this person can in all probability achieve greater personhood through leaving this life than in remaining as a part of it. In such a case, euthanasia is the more moral choice."³



Well, while assisted suicide may remove suffering, it also threatens our most vulnerable citizens—the elderly and the disabled, who already struggle to justify their lives. “I like autonomy very much,” says Theo Boer, a professor of ethics at the Theological University Kampen in the Netherlands. “But it seems to have overruled other values, like solidarity, patience, making the best of things. The risk now is that people no longer search for a way to endure their suffering.”⁴

There are enormous risks associated with allowing persons to determine the time of their own deaths. Wesley J. Smith, a California lawyer and consultant for the International Task Force on Euthanasia and Assisted Suicide, laments that people have forgotten the meaning and value of suffering: “There is a new view of suffering, that it’s the worst of all possible experiences, and that the role of society is to prevent it, as opposed to mitigating it.”⁵

Brittany Maynard, a twenty-nine year-old woman in California with the diagnosis of terminal cancer, moved to Oregon last year, where the law allowed her to take her own life. But, with the very same diagnosis and prognosis as Brittany Maynard, David Kuo lived another ten years, had two beautiful children, wrote a book, struggled, fought, and touched many lives.

His conversations with his neuro-oncologist resulted in her starting a ministry to homeless cancer patients. His last days provided healing between political enemies and deep wounds among friends and family. After David’s death, his wife, Kim, noted that, as hard as the journey was, “No one below the throne of God can predict how the journey of life will go, and we shouldn’t pretend to.”⁶



Professor Boer, once a supporter of assisted suicide, has written that “euthanasia is on the way to becoming the default mode of dying for cancer patients in the Netherlands.” When Britain was considering enacting such a law, Boer counseled, “**Don’t do it. Some slopes are truly slippery.**”⁷

³ Stancil, p. 55.

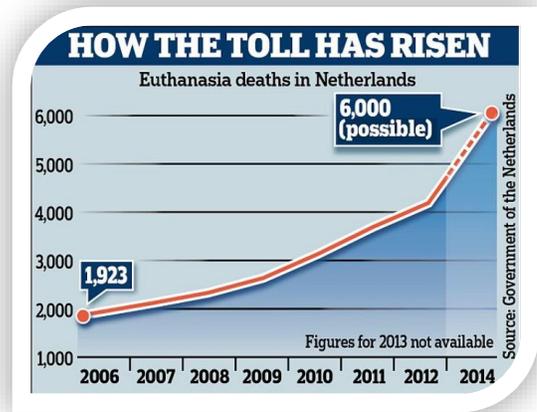
⁴ Winston Ross, “Dying Dutch: Euthanasia Spreads across Europe,” *Newsweek*, February 12, 2015, www.newsweek.com/2015/02/20/choosing-die-netherlands-euthanasia-debate-306223.html

⁵ Phone interview with Winston Ross.

⁶ Kim Kuo, “Giving Our Final Days to God,” *Christianity Today*, September 2015, 41-44.

⁷ <https://dredf.org/wp-content/uploads/2012/08/netherlands-dont-make-our-mistake-daily-mail-online-7-9-14.pdf>
www.dailymail.co.uk/news/article-2686711/Dont-make-mistake-As-assisted-suicide-bill-goes-Lords-Dutch-regulator-backed-euthanasia-warns-Britain-leads-mass-killing.html

In countries where assisted suicide has been made legal, euthanasia—different from assisted suicide in that a doctor *directly* acts (such as via lethal injection) to end a patient’s life—has expanded. The number of “mercy killings” in Belgium rose 27% in 2014, to five killings per day on average. While euthanasia is technically illegal in the Netherlands, the government mostly looks the other way. It has mobile euthanasia units for people who want to die at home, as well an initiative to expand the laws to include people older than 70 who are simply tired of life.



One study found that 32% of assisted deaths in Belgium were done **without the patient’s consent**. In Switzerland, a healthy woman paid \$20,000 for an assisted suicide because she was unhappy about ‘losing her looks.’ Her family found out afterward, when they received her ashes and death certificate.⁸

Now in order for assisted suicide to work, someone has to decide who can choose to die, and when, and how. Should children be included? The mentally ill? Should the cost of keeping someone alive be a factor in determining whether they should die? I was with a pre-teen boy just last night whose physically-frail and medically complex life would likely have been ended long ago if financial cost had been entered into the calculus.



In point of fact, in 2008, Oregon Medicaid officials sent a letter to Barbara Wagner and Randy Stroup after the couple sought treatment for her lung cancer and his prostate cancer. **The state denied their (costly) treatment, but on a list of alternative options, it offered to pay for assisted suicide.**⁹ The couple went public and the state changed its mind, but as this new approach to life, death, and suffering gains ground, governments will be less and less willing to support expensive end-of-life treatment regimens. The old, the weak, the sick, and the disabled will become more and more expendable as the effects of “suicide creep” grow and expand.

Diane Coleman, President and CEO of “Not Dead Yet,” a disability rights group, argues that there is no way to legalize assisted suicide without accepting the risk that vulnerable people will be pushed to their deaths—by the health care system, by their own guilt, by abusive family members, or by caregivers. “We don’t think any set of safeguards is sufficient,” she says. “We need to respond to the desire to die with the message, ‘No, how can we help you? How can we be with you?’ That’s the real compassion people deserve.”¹⁰

Compassion for those who suffer is a good thing. It’s a biblical thing. Yet, while it may be possible to conceive of circumstances in which positive action to end life, either by the sufferer or by someone else, might be a morally-justifiable choice, it seems to me that the

⁸ Kuo, “Giving Our Final Days to God”

⁹ www.patientsrightscouncil.org/site/oregon/

¹⁰ Ross, *Newsweek*

slippery slope is slippery indeed. **It's probably too slippery to step on at all.** How would the history of the world be different if Joseph had somehow been relieved of his suffering in Pharaoh's prison before the time came in which he could act to fulfill his God-ordained destiny?



Now I recognize that I'm writing from the relatively safe perspective of someone who is not currently suffering. I realize that protracted and intractable pain is an awful, horrendous thing. But I invite you to consider the difference that Joni Tada Eareckson has made in the world during these many decades since she became a quadriplegic. I remind you that William Cowper ("Cooper") was hospitalized for depression several times and attempted suicide three times, but it was also Cowper who wrote these words:

"There is a fountain filled with blood drawn from Immanuel's veins; and sinners, plunged beneath that flood, lose all their guilty stains. The dying thief rejoiced to see that fountain in his day; and there may I, though vile as he, wash all my sins away. E'er since by faith I saw the stream Thy flowing wounds supply, redeeming love has been my theme, and shall be till I die."

You and I benefit today from Cowper's struggle long ago; and Kim Kuo's counsel for the journey is this: "Act with true compassion. Get involved in their lives. Be present in their suffering. Pray for their healing. Let the reality of death change your life."

And I am reminded that our Lord Himself, as He faced the excruciating (literally, "out of the cross") pain of Good Friday, said, "**Now my soul is troubled, and what shall I say? Father, save me from this hour? No, it was for this very reason I came to this hour. Father, glorify your name!**" (John 12:27).

"In this world you will have trouble," He told us, **"But take heart! I have overcome the world"** (John 16:33).

With you, I do indeed hope that when my own time for dying comes, that the journey will be "quick and painless." But should it not be so, I pray that I will join the Lord in the prayer, "*Father, glorify your name,*" because, with Paul, "*I want to know Christ—yes, to know the power of his resurrection **and participation in his sufferings, becoming like him in his death,** and so, somehow, attaining to the resurrection from the dead*" (Philippians 3:10-11).

Dave

