

Shepherding the Dying

by the Rev. Rick Bergh

A WORD FROM AFL

STATEMENT FROM THE REV. GEORGETTE FORNEY REGARDING MEDICAL ASSISTANCE IN DYING

Medical Assistance in Dying is a euphemistic phrase for allowing people to choose to take their lives. This according to the Scriptures is clearly wrong and evil. And yet it has now been made legally available to our northern neighbors in Canada. In addition, similar laws have passed in ten US states, under the auspices of physician assisted suicide. Sadly, I have spoken with pastors here in the United States who also believe seeking assistance in dying is an acceptable way to die.

Recognizing the reality that people are beginning to think of hastening one's death is okay, we as Shepherds need to be prepared to address this very serious thing. It puts Pastors in a very difficult position. The Anglican Network in Canada and the Anglican Church in North America stand for life.

In Psalm 139, David says to God, "You formed my inward parts, you knitted me together in my mother's womb. I praise for I am fearfully and wonderfully made. Wonderful are your works." A little later he says, "Your eyes saw my unformed substance; in your book were written, every one of them, the days that were formed for me, when as yet there was none of them."

So, what is our response to someone who is choosing to say no to life, and go down the path to impose death?

This booklet is designed to guide clergy in having difficult but critical conversations with both the patient and their family, when possible. As Shepherds, we are called to help the dying enter into discussions about mortality, legacies, and fears that surround death.

We can in no way give the impression that the Church thinks MAiD or assisted suicide is okay. It is not okay. You must help the dying address their life so when death comes, God's peace and presence ushers them into glory.

These can be difficult conversations, hence the booklet you hold is designed to help you, help them. It has been written by an Anglican priest who is also a Thanatologist, with years of experience in helping people die well. I pray for the love of Christ to constrain us. To give us the eyes that Jesus has but ultimately our goal always as pastors of the Gospel is to be reconciled to God. He who knew no sin became sin on our behalf. That we might become the righteousness of God, even at the critical time of nearing death, a person can choose life, choose to trust God for His timing in death and what a glorious thing that would be. May this booklet equip you shepherd your flock in such sacred times.

Your eyes saw my unformed substance; in your book were written, every one of them, the days that were formed for me, when as yet there was none of them.

This booklet is divided into 7 sections:

Section 1 – INTRODUCTION and Summary of C-7

Section 2 – PREPARING: Four areas to reflect upon prior to a pastoral visit with a person who has been terminally diagnosed

Section 3 – POSITIONING: Two things that will make you a better listener and learner

Section 4 – ENGAGING: Six common areas that open up the conversation when it gets tough

Section 5 – CONTINUING: Examining the top three reasons people consider MAiD as an end-of-life option

Section 6 – REFLECTING: Twelve questions to initiate meaningful conversations following a terminal diagnosis

Section 7 – RESOURCES to Prepare for Living Until You Die

INTRODUCTION

This booklet has been created to equip you, as a shepherd in God's Church, to provide pastoral counsel to those who are facing death. Conversations with those who have received a terminal prognosis can be difficult, but part of our calling as pastors is to help prepare them; whether they are parishioners, patients in hospice, friends of friends, or strangers who walk into your office wanting to prepare themselves for a peaceful passing, we both long and need to share the hope of heaven with them as their ultimate destination.

We recommend you sit and read through this material completely to understand and appreciate the contents. But we recognize that your use of it will be based upon the needs of those for whom you are providing pastoral care.

This is a suggested process for priests when engaging with people who are dying, both for believers and non-believers, as well as for those who have indicated their intention to explore or have decided to move forward with Medical Assistance in Dying (MAiD). While we can appreciate the fears and uncertainties that can lead people to consider hastening their deaths, we need to uphold the Scriptures and teach that only God numbers a person's days and that each day of life has purpose and value.

The Church's response to Medical Assistance in Dying is based on our recognition of common care and concern for one another. While the world celebrates independence, individualism, and the right to express and choose how we live and die, the reality is that the human experience is made up of relationships and interaction with one another. Therefore, when one seeks to 'schedule' their death, it is incumbent on us as shepherds to help the hurting sheep. The sheep need to know that a network of people will walk with them through their difficult season, as that is the function of a family including a church family.

MAiD is a bad law because it honors individualism while ignoring the reality of who we are as people in relation to one another. Laws to address dying should focus on support, and protect the giving and receiving of love and care, which we all depend on in times of vulnerability, sickness, and need as fellow human beings.

Our prayer is that the Church will model a level of love, care, and compassion – so no one ever feels alone, invisible, or abandoned to the point of seeking medical assistance to hasten their death.

46 %

of 736 doctors
felt unsure about
discussing death with
terminally-ill patients.

60% do not
initiate discussion,
because they are
not sure it is the
right time.



Update on Medical Assistance in Dying & IMPLEMENTATION

On March 17, 2021, the Canadian Parliament passed revised legislation that changes who may be eligible to obtain medical assistance in dying. The changes take effect immediately, and the critical points are as noted. This information was taken from: <https://www.canada.ca/en/health-canada/services/medical-assistance-dying.html>

State laws that allow physician assisted suicide are similar to Canada's, and most seek similar expansion as noted below. Contact Anglicans for Life - for specifics about the laws in particular states.

1

WHO IS ELIGIBLE FOR MEDICAL ASSISTANCE IN DYING NOW?

- if you are eligible for health services funded by the federal government, or a province or territory (or during the applicable minimum period of residence or waiting period for eligibility)
- if you are at least 18 years old and mentally competent. This means being capable of making health care decisions for yourself.
- have a grievous and irremediable medical condition – meet all of the following criteria:
 - » have a serious illness, disease or disability (excluding a mental illness until March 17, 2023)
 - » be in an advanced state of decline that cannot be reversed.
 - » experience unbearable physical or mental suffering from your illness, disease, disability, or state of decline that cannot be relieved under conditions that you consider acceptable.
 - » You do not need to have a fatal or terminal condition to be eligible for medical assistance in dying.
- make a voluntary request for MAID that is not the result of outside pressure or influence.
- give informed consent to receive MAID. To be eligible, you must provide informed consent to your practitioner. This means you have consented (given permission) to MAID after you have received all of the information you need to make your decision, including:
 - » your medical diagnosis
 - » available forms of treatment
 - » available options to relieve suffering, including palliative care
 - » You must be able to give informed consent both:
 - * at the time of your request
 - * immediately before MAiD is provided unless special circumstances apply.

You can withdraw your consent at any time and in any manner.

2

WAIVER OF FINAL CONSENT

The March 17, 2021 changes allow you to waive the requirement for giving final consent just before MAiD is provided, only if:

- your natural death is reasonably foreseeable

AND

- while you had decision-making capacity:
 - » you were assessed and approved to receive MAiD
 - » your practitioner advised that you are at risk of losing capacity to provide final consent
 - » you made a written arrangement with your practitioner in which you consent in advance to receive MAiD on your chosen date if you no longer have capacity to consent on that date

Any arrangement for the waiver of final consent will be considered invalid if, at the time that MAiD is to be provided, you no longer have capacity and you demonstrate refusal or resistance to the administration of MAiD by words, sounds or gestures. For further clarity, reflexes and other types of involuntary movements, such as response to touch or the insertion of a needle, would not constitute refusal or resistance.

3

ABOUT MENTAL ILLNESS & MAiD

If you have a mental illness as your only medical condition, you are not eligible to seek medical assistance in dying. Under the new changes made to the law, Canadians who fall under this category are excluded from seeking MAiD. This exclusion remains in effect until March 17, 2023. After March 17, 2023, people with a mental illness as their sole underlying medical condition will have access to MAiD if they are eligible and the practitioners fulfill the safeguards that are put in place for this group of people. If you have a mental illness along with other medical conditions, you may be eligible to seek MAiD. Eligibility is always assessed on an individual basis, looking at all of the relevant circumstances.

PREPARING

Prior to beginning a pastoral visit with someone who has received a terminal diagnosis – or who may be in a position to consider MAiD under current law – it's good to review the following areas that may provide important insights and a possible direction for your initial conversation.

A.

THEIR FAMILY BACKGROUND

You may or may not know the person to whom you are ministering. Regardless, getting to know this person's past experience with death and dying, both in their family of origin and in their close relationships, will help you better understand their current choices. Our historical antecedents influence our decisions based upon what happened previously in our lives and what was internalized as either a positive or negative experience. Basically, our past experience informs and influences our present choices.

Be prepared to discover what happened in their past. Then discern, from a scriptural perspective, whether this past experience might be leading the person in a direction that is contrary to an orthodox Christian view.

These initial conversations are really about sorting out the information, without judgment. It's crucial not to rush in – armed with the information that we know is valuable from Scripture – without understanding where a person's thinking lies and how that thinking originated.

There will be time to dig more deeply into God's Word (we will discuss that later in this booklet, as we examine the major areas that preoccupy people's minds when they are dying, and why they might be considering MAiD as an option), but right now, just ask questions. Jesus asked inquisitive questions and so should we.

B.

THE INFLUENCE OF OTHERS

Those who are closest to us greatly impact our decisions. This is especially true at the end of life. It's important to take notice of which people are closest to the person who is dying. What kind of influence do these individuals have upon the person who is dying? Have you seen a shift from a scriptural viewpoint in this person's conversations that you didn't notice previously?

Be aware of who is showing up after an absence in this person's life. What outside sources may be influencing or directing this person's end-of-life decisions in a way that is disconcerting to you? Always ask who has visited or phoned, but also never underestimate the influence of the World Wide Web upon people's decisions. Always be aware of who is in the room of the dying person, and what they are suggesting as choices to a family member or friend.

We know that the daily information that streams into our lives is difficult to digest and discern. This is all the more challenging for the one who is dying. A person who is dying is tired – physically, mentally, and emotionally. As priests we must focus on the spiritual needs of those in our pastoral care and help people discern between healthy and unhealthy information. This will help them live fully until the end, based upon God's Word and will.

PREPARING

80%

of people say that, if seriously ill, they'd want to talk to their doctor about end-of-life care. 7% report having had end-of-life conversations with their doctors.

G.

THE PRIEST

The office of priest brings with it a specific calling and responsibility. Priests bring prayer, Scripture, sacrament, confession, absolution, and anointing oil. What the priest brings and offers on behalf of their office is significant and necessary for the one who is dying.

We need to be reminded that a priest's role at the end of life extends beyond the person who is dying. Although the person who is closer to death requires immediate pastoral care, priests still live under the mandate of the Great Commission and are called to proclaim the message of Jesus Christ crucified and risen. There will be many people in this person's life who do not know the Lord; family members who have perhaps left the faith and others who never believed. The more you gather people together for conversations that matter, the more you have the opportunity to talk about Jesus and the gift of grace that is offered for all.

Later in this booklet, we'll talk about why dying should not be seen only as an individual experience but rather as a communal initiative.

In addition, remember the importance of intercessory prayer, and ask your prayer ministry team to pray for you as you go and minister. Remember that we are not wrestling against flesh and blood but principalities. So be sure you are covered in prayer. Remembering that this is a battle for the soul, reinforces the importance of the Holy Spirit's intervention and help.

D.

THE STAGES OF DYING

It is important to have some understanding of the stages of dying. Is dying always this linear? No. But, these patterns are fairly consistent in people's dying process.

A person of faith who is confident in the promises of eternal life and trusts Jesus seems to be able to move through these stages into acceptance more easily than those who don't know Jesus. Regardless of where we are in our walk with Jesus, we all look at our mortality a little differently. So, it's good to have some knowledge about these areas.

When you visit people who haven't yet met Jesus, you will notice these stages to be even more pronounced. It's important to watch for them. This will give you an opportunity to enter into conversation about the thing that is most on their mind.

We must honor where a person is in their "dying trajectory", as each person is coming to terms with the truth that his or her life on earth is drawing to a close.

Denial - Shock! People refuse to accept the prognosis.

- The doctor is wrong!
- It's really not true.
- This can't be happening to me.
- It can't be me.

Anger - Feeling cheated! Often there is resentment towards others. Emotional bursts can be expected.

- Why me?
- This is so unfair!

Bargaining - Looking for a way out. A lot of promises are made.

- I'll be kinder.
- I will be a better person.
- I will do anything you want, God, as long as you let me live longer.

Depression - There is much sadness in this phase.

- There is no hope.
- What's the point of living?
- I just want to be alone.
- It's hopeless.

Acceptance - An inner peace and calm emerge.

- I've had a good life.
- I need to be thankful for my life.
- I need to let go now, and I'm okay with that.

POSITIONING

This next section provides additional suggestions to help develop and nurture meaningful conversations with the dying person. Focus on the person who is dying. Give them space. Give them time. Give them voice. Your time will come to speak into their lives the message from God's Word.

ASK CURIOUS QUESTIONS

We must be willing to enter into conversation about the areas of their lives where people have the deepest questions and allow them to explore these questions. This is true whether a person is a believer or not.

Using forceful statements is never an effective approach. Jesus told stories and asked questions. Making categorical statements can shut down a conversation. Approach people with grace and openness. Let people take the lead in what they would like to talk about. You will be surprised where they take you.

CONSIDER BEGINNING THE CONVERSATION WITH PHRASES LIKE:

- I'M CURIOUS ABOUT...
- I WONDER...
- WHAT ARE YOUR THOUGHTS ABOUT...
- WHAT HAS YOUR EXPERIENCE BEEN IN THE PAST...

Remember, this person has never personally experienced dying before. It is brand new to them. To assume that the transition into this final chapter of their life will be okay because they have faith is never a good starting point. We are human and mortality is an enemy. Yes, we know that Jesus defeated death, but to look death in the face isn't an easy thing.

If a person is not a believer, then it is even more crucial to be patient. While we know that Jesus is the answer, why not allow the questions to flow from the Holy Spirit and the individual? This will position you for God's kairos time to go deeper into the gospel message.

BECOME A LEARNER

As death draws near, people are in a very real place. Even though you may be in a position of authority, consider this also as an opportunity to learn from the person who is dying.

If there were ever an opportunity to make a lasting contribution and impact a person in a positive way, it's when a person is dying. Why? Because he or she is sharing out of a deep place that we have not yet experienced ourselves. Let them contribute to your life as well.

A question I always ask is, "I would like to take some time to learn from you today. You are at a place where I have never been but will be some day. Can you share with me what you are thinking about or experiencing right now?"

This question will also surprise the unbeliever you are visiting. They may be expecting you to come in as the authority in this area, but now you are humbly seeking to learn from them. Being willing to hear what is deep within their heart may well lead to further conversation.

60% of people say that making sure their family is not burdened by tough decisions is “extremely important.”

56% of people have not communicated their end-of- life wishes.

ENGAGING

You may have had some interesting initial conversations during your discernment phase. You have offered the Word, confession, sacrament, and prayers for healing. You are providing pastoral care. Perhaps these initial conversations facilitated deeper topics that are important for everyone to discuss prior to their deaths. Why are they important? Because initial conversations can lead to deeper topics that are hidden and waiting to emerge.

But what if the initial conversations don't lead to very much depth, and the person who is dying uses humour to deal with their situation and resorts to chit chat of little depth? What if family members are not talking about critical things and skirting important issues? We have all been there when this happens.

How do you get conversations going when they are stuck? Sometimes it's challenging to encourage deeper conversation – family members have a difficult time accepting the fact that their loved ones are going to die. Or perhaps they are not comfortable talking about it, and it stifles the conversations that need to take place.

Here are six topics to help start conversations about important relationships. Remember, there are always at least two stories: The one that is spoken out loud and the one that is being sorted out internally within each person as he or she gets ready to say goodbye to family, friends, and his or her life. This is the last chapter, and people are thinking deeply, even though they may not be expressing it openly.

Here are some common areas most people are thinking about as they face death. When space is given and a gentle invitation is offered, rich and meaningful conversations emerge that are important for a person's peaceful passing.

A. THE FORGIVENESS FACTOR:

THE WORK OF TATTERED RELATIONSHIPS RESTORED AS BEST THEY CAN.

As we know, we live in a broken world, and our relationships don't always match our hopeful expectations. Often, as people are looking back on their lives when they're dying, there are people whom they are thinking of who have hurt them or whom they have hurt. Harsh words might have been spoken. An action led to the relationship being scarred and causing separation. If you notice that a family member is absent – someone whom you'd expect to be there but isn't – it may be a sign of a broken relationship. You'll want to take note of that.

Action: Tell someone you forgive them

Question: Is there a person you have not seen for a long time but need to?

B. WHAT HAS BEEN ADDED TO MY LIFE:

THE WORK OF INDIVIDUAL CONTRIBUTION TO THOSE WHO ARE CLOSEST TO ME.

So often we focus upon the person who is dying, when in fact dying is a communal initiative that involves each person who is important in the life of the dying individual. Remember that a big consideration in the dying process is to help people think through how their family will manage and adapt to a life without them physically present following death. The words that the dying person speaks are important and can be supremely impactful when an individual affirms what each person has meant to him or her.

Action: Tell someone you appreciate them

Question: Are there people in your life who are important to you? Have you ever told them why they are important to you?

More ENGAGING

C. WHAT HAVE I DONE WITH MY LIFE:

THE WORK OF LEGACY-BUILDING THAT AFFIRMS THE PURPOSE OF MY LIFE IN THIS WORLD.

Many people reach back into their life journey to examine what they have done – and what they have not done. Yes, there may be a few regrets, but mostly people ask, “What am I leaving behind that will be remembered?” This will be very different for each person. Be aware that some will be sad that their lives didn’t turn out the way they had hoped. Even this is an opportunity to focus upon what they did do and the lives they did experience.

Action: Share with another your contribution to the world

Question: Can you tell me about what you are leaving behind in this world that is most important to you?

D. BLESSING THOSE WHO ARE IMPORTANT TO YOU:

THE WORK OF TELLING SOMEONE YOU BELIEVE IN THEM.

The final words that we hear from those who are dying are so important. The words we say to our loved ones and friends who are dying are important. These words can have a lasting impact in the days that follow the person’s final breath. Encourage the one dying to offer a special blessing (unique words to each person) as a way to say goodbye and to leave them with words of encouragement, too. It goes both ways.

Action: Last blessings and words to those you love

Question: Are there individuals in your life whom you could empower through your words? Perhaps they need you to spur them on to the next important step in their life and need your encouragement. Can you offer a blessing?

E. WONDERING WHAT MIGHT BE NEXT:

THE WORK OF EXPLORING THE AFTER-LIFE.

The natural conversation we want to have as priests is the topic of eternal life. Indeed, we know that most people are thinking about what is next after this earthly life. People have deep and curious questions about what happens when they take their last breath and wake up to something else. Of course, for believers this is the wonderful message of the Good News coming to fruition as we trust Jesus. Remember, there will likely be people watching and listening in. This topic can touch a heart that is also wondering about eternal life in Jesus. For those who are not believers, the opportunity to explore this question is an amazing opportunity.

Action: Questions of the Soul

Question: Have you considered what happens after your last breath on earth?

F. GRIEF OBSERVED;

THE WORK OF GRIEF IN THE PRESENT.

There is much grief in dying, grief from the dying person and grief of family and friends. Often people would rather not talk about what they are going to miss about the person when they’re gone, but when someone is actually dying, it is in the forefront of their hearts and minds, allowing authentic and deep conversations to emerge more naturally.

Action: Recognizing Anticipatory Grief and Mourning

Question: I’m wondering if you’ve been able to tell your family and friends what you are going to miss about them or what events you will not be able to be there for after you die?

CONTINUING

This section helps us to be aware of three major reasons why people might choose MAID and why people and families might struggle with the timing of their loved one's death. The previous section helps us to have meaningful conversations; this section digs deep into some very important issues around dying when it seems to be going on too long.

When you visit the dying, you will notice some common themes emerging. These may be expressed in different ways, but the three main topics of concern for the dying are impacted by how they view themselves. Think back to their history of death and dying and be aware of the influence that others have on them as you consider these topics.

Be prepared to ask questions – from a scriptural perspective – and lead people into deeper conversations about what God has to say about each topic, as found in God's Word.



PURPOSE: TO HELP YOU CONSIDER YOUR PURPOSE

There is no doubt that people begin to question their meaningful contribution to life during their last chapter. Their body is dying, and they are emotionally exhausted; questions will come to the surface about their purpose.

I'm not sure why I'm still alive.
I don't know why God has not taken me yet.
What's the use of living in my condition?
I wish God would just let me die.

We need to affirm the contribution of the person's life right to that last breath. God does have a purpose for each of us right to the end. We who are living must remind those who are dying how important they are to us, especially as they question God's reason for keeping them around on this earth.

God is not finished with this person – there's a reason why they have not died. The language we use and the invitation we offer a person about his or her contribution and purpose – however that might look – allows a person to live out life to the end in a meaningful way.

God always has plans. We need to pray with that person who is dying about those plans and discern God's purposes for this individual as a follower and disciple of Jesus Christ.

Question: What is the message you would like to give to your family and friends about your ongoing purpose – right until God calls you home?

Other questions you might ask when a person is feeling discouraged by a lack of purpose.

- I'm curious: Who is God for you, and what would you like to say to God right now?
- Have you ever considered asking God why He might be keeping you around?
- Do you have any idea what God might want to say to you right now?
- What words would you like to hear from God that would be most helpful for you right now?

A.

SCRIPTURES THAT SPEAK TO PURPOSE

So we are always of good courage. We know that while we are at home in the body we are away from the Lord, for we walk by faith, not by sight. Yes, we are of good courage, and we would rather be away from the body and at home with the Lord. So whether we are at home or away, we make it our aim to please him. (2 Corinthians 5:6--9)

Was I vacillating when I wanted to do this? Do I make my plans according to the flesh, ready to say “Yes, yes” and “No, no” at the same time? (2 Corinthians 1:17)

For we are his workmanship, created in Christ Jesus for good works, which God prepared beforehand, that we should walk in them. (Ephesians 2:10)

For to me, living is Christ and dying is gain. If I am to live in the flesh, that means fruitful labor for me; and I do not know which I prefer. I am hard pressed between the two: my desire is to depart and be with Christ, for that is far better; but to remain in the flesh is more necessary for you. Since I am convinced of this, I know that I will remain and continue with all of you for your progress and joy in faith, so that I may share abundantly in your boasting in Christ Jesus when I come to you again. (Philippians 1: 21--26)

Is not wisdom found among the aged? Does not long life bring understanding? (Job 12:12)

Remember the days of old; consider the generations long past. Ask your father and He will tell you, your elders, and they will explain to you. (Deuteronomy 32:7)

B.

SUFFERING: TO HELP YOU CONSIDER YOUR SUFFERING

Suffering is very difficult for people. Sometimes, it is even more difficult for family members watching on. Encourage palliative care for your loved ones. A good understanding of what palliative care is and offers is important information to convey to families for their peace of mind. Please refer to the chart on suffering that makes an important distinction between suffering with and suffering without. This will lead to crucial conversations as people think about the suffering they are experiencing.

Concerns you may hear expressed by those who are suffering:

- I don't know if I can handle not knowing about the process of dying.
- It's hard for me to think about my family watching me suffer.
- I think there is a lot of pain in dying, and I don't know if I can bear it- I'm a little scared.
- It's easier to just die than go through the suffering-both for me and my family.

Question: What is the message you would like to clearly share when your family becomes worried about your suffering and pain?

- Other questions you may ask if a person is concerned about suffering:
- I'm wondering if you have ever faced something unknown in the past.
- What in the past has helped you move through painful moments?
- I'm wondering what would give you peace right now.
- How have you faced being scared in the past?

B.

SCRIPTURES THAT SPEAK TO SUFFERING

For I am sure that neither death nor life, nor angels nor rulers, nor things present nor things to come, nor powers, nor height nor depth, nor anything else in all creation, will be able to separate us from the love of God in Christ Jesus our Lord. (Romans 8:38--39)

And the God of all grace, who called you to his eternal glory in Christ, after you have suffered a little while, will himself restore you and make you strong, firm and steadfast. (1 Peter 5:10)

I consider that our present sufferings are not worth comparing with the glory that will be revealed in us. (Romans 8:18) Not only so, but we also glory in our sufferings, because we know that suffering produces perseverance; perseverance, character; and character, hope. (Romans 5:3--4)

Even though I walk through the darkest valley, I fear no evil; for you are with me; your rod and your staff — they comfort me. (Psalm 23:4)

C.

BURDEN ON OTHERS: TO HELP YOU CONSIDER THE ROLE OF YOUR FAMILY

Perhaps one of the most difficult challenges people face is having to watch their family care for them day after day – taking them away from their children, their jobs, and their lives. They feel like they're being a heavy burden and don't want to be.

Concerns you may have heard from those who are terminally ill or unwell:

- I'm really worried about my family and what this is doing to them.
- I really don't want to be a burden on my family.
- My kids are busy with their own lives - they shouldn't have to deal with this stuff.
- I don't want my family to have to give up their plans for my sake.

Question: What is the message Scripture gives your family about caring for you during your last chapter on earth?

- Other questions to consider if a person feels as though they are a burden to their family:
- Can you tell me a little about your family?
- Are you worried about one family member in particular?
- Who in your life needs you the most right now?

C.

SCRIPTURES THAT SPEAK TO FAMILY VALUES

Listen to your father, who gave you life, and do not despise your mother when she is old. (Proverbs 23:22)

Children, obey your parents in the Lord: for this is right. Honour thy father and mother; which is the first commandment with promise; That it may be well with thee, and thou may live long on the earth. (Ephesians 6:1--3)

If anyone does not provide for his relatives, and especially for his immediate family, he has denied the faith and is worse than an unbeliever. (1 Timothy 5:8)

Carry each other's burdens, and in this way you will fulfill the law of Christ. (Galatians 6:2)

Praise be to the God and Father of our Lord Jesus Christ, the Father of compassion and the God of all comfort, who comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves receive from God. (2 Corinthians 1:3)

Medical Assistance in Dying

Some people you visit will ask about MAiD. Others perhaps have decided to move forward with their decision. You may hear about this from the person themselves or from a family member, friend, or even another parishioner. An initial conversation should always begin with “curious questions” and not forceful answers. Consider the three most common reasons for people to choose MAiD (purpose, suffering, burden) when entering into conversations about MAiD. I cannot stress how these three areas impact the decision about MAiD. Remember also the influence that other people have in the dying person’s life.

“I have decided to go ahead with MAiD.”

Ask yourself as a priest: “What are they really thinking about?”

Questions to ask:

- I’m curious – what is it about MAiD that most appeals to you?
- I’m wondering if you know another person who has chosen this option?
- Have you considered whether a decision about MAiD could impact your loved ones?
- Who has talked to you about the details about MAiD?
- How is your family responding to this decision?
- Have you been able to have a conversation with God about this?
- Have you considered the final message that you would like to leave with your family and friends?

Although our legacies are the full lives we’ve lived, as believers in the Lord Jesus, we want to please Jesus to the very last breath. We want to be sure the message we leave behind for our family focuses upon the saving grace of Jesus Christ. The overall message of life from conception to last breath – honoring God and believing in His continued presence and love to the very end – is a very important message to be remembered forever by those closest to us.

When we are entering into conversations about MAiD, we have a bigger story that we need to consider: The story of God in us and the message of the gospel. We want that to be the legacy we leave behind as the most important part of our lives. It’s always our ultimate prayer that the next generation of our loved ones will know the joy of eternal life with Jesus.

Question: What is the message you most want to share with your family and friends in the final chapter of your life?

Scriptures to share:

“Do not let your hearts be troubled. Believe in God, believe also in me. In my Father’s house there are many dwelling places. If it were not so, would I have told you that I go to prepare a place for you? And if I go and prepare a place for you, I will come again and will take you to myself, so that where I am, there you may be also. And you know the way to the place where I am going.” Thomas said to him, “Lord, we do not know where you are going. How can we know the way?” Jesus said to him, “I am the way, and the truth, and the life. No one comes to the Father except through me.” (John 14:1--6)

Behold! I tell you a mystery. We shall not all sleep, but we shall all be changed, in a moment, in the twinkling of an eye, at the last trumpet. For the trumpet will sound, and the dead will be raised imperishable, and we shall be changed. For this perishable body must put on the imperishable, and this mortal body must put on immortality. When the perishable puts on the imperishable, and the mortal puts on immortality, then shall come to pass the saying that is written: “Death is swallowed up in victory.” “O death, where is your victory? O death, where is your sting?” (1 Corinthians 15:51--57)

We do not live to ourselves, and we do not die to ourselves. If we live, we live to the Lord, and if we die, we die to the Lord; so then, whether we live or whether we die, we are the Lord's. (Romans 14: 7--8)

For God so loved the world that he gave his only Son, so that everyone who believes in him may not perish but may have eternal life. (John 3:16)

Please remember, if a person is given time and has a terminal illness (as opposed to a sudden death), there is important work to be done to help lighten the grief that follows for the family members. The more we can invite families to share in this last chapter with their loved ones, the less likely there will be problems for and between family members following the death. Offer to bring families together and facilitate some of these important conversations.

MISCONCEPTIONS ABOUT MAID FROM ANGLICANS FOR LIFE

Doesn't MAiD guarantee a painless death? Isn't that a better way to die? Actually, the drugs used to cause death by euthanasia are similar to what is given to those who are killed by lethal injections in capital punishment. In 2016, researchers reviewed autopsy reports from inmates on death row, which indicated that fluid was present in many of the inmates' lungs. This is a condition called pulmonary edema, which can cause a person to feel like they are drowning or suffocating. Of the 200 autopsies reviewed, and it was determined that 84% showed signs of pulmonary edema.¹ While euthanasia advocates may argue that euthanasia gives people a peaceful death, deaths caused by similar drugs indicate that people may experience feelings of drowning and suffocating.

Isn't death by MAiD quick? Actually, the amount of time that individuals take to die varies greatly. According to a 2018 report from Washington State, 62 people took over 90 minutes to die. The span of time to die ranged between 7 minutes and 30 hours.²

MAiD corrupts the Doctor/Patient Relationship: Assisted suicide undermines medical efforts to maintain and improve pain management and care for patients near the end of life. Because no doctor can predict a person's life expectancy accurately (many patients outlive a "6-months or-less" diagnosis), the ability for patients to fully trust their doctors is impacted.

MAiD makes Freedom to Die become Duty to Die: The freedom to refuse healthcare treatments is eliminated when insurance denies payment for life-saving treatment, but covers life-ending drugs. For patients facing the challenge of rising health care costs or fearful of being a burden to loved ones, requesting lethal drugs becomes an option.

MAiD increases Suicide Rates: Media coverage of assisted suicide glamorizes suicide, leading to "imitative suicidal behaviors," especially among young or depressed people. The suicide rate in Oregon has been increasing since its legalization, as of 2012, the rate was 42% higher than the national average.

MAiD increases Risk of Abuse: Once prescribed, there is no medical oversight to ensure lethal drugs are taken by the patient voluntarily and not ingested by someone else. Elder abuse is a major concern in America, and yet there is no protection for the patient requesting assisted suicide to ensure she/he is not being coerced or forced to request death. It fosters discrimination toward the elderly, terminally ill, or disabled, who are offered lethal drugs to kill themselves due to an arbitrary definition of "quality of life."

MAiD devalues the Gift of Organ Donation: Encouraging patients to hasten their death so that others can live via their organ donation unduly pressures them and undermines their own value and dignity. Organ harvesting has been politicized to justify legalizing assisted suicide.

¹ <https://www.npr.org/2020/09/21/793177589/gasping-for-air-autopsies-reveal-troubling-effects-of-lethal-injection>

² <https://www.doh.wa.gov/Portals/1/Documents/Pubs/422-109-DeathWithDignityAct2018.pdf>

REFLECTING

Part of your pastoral ministry is to serve members of your congregation who are nearing death. These are good questions to ask when shepherding your parishioners in their last chapter of life. These may be used as conversation starters that coincide with some of the biggest fears or concerns a person who is dying might have at the outset of their diagnosis or in the last chapter of their lives on earth.

Question 1:

I'm sorry that you have received a difficult prognosis. How may your church family best help you at this difficult time? I wonder what I'm going to learn from you as you go through this journey towards Heaven?

Question 2:

I'm wondering if we could talk about your past experiences with people close to you and how you experienced their final days on earth. Sometimes, our past experiences impact us more than we realize, and we would like it to be different for us. Are you okay to look back in order to think about what you don't want to have happen, and what you want instead?

Question 3:

When you think about those who are closest to you, with whom might you want to spend a little more time? Who might need more of your time? Can we talk about your family and friends and perhaps those whom you're most concerned about right now?

Question 4:

Whom do you want close to you in your final days on earth? Is there anyone who needs to be kept at a distance? Jesus often just had Peter, James, and John with Him in His difficult times.

Question 5:

Fear of the unknown robs us of living. It was no different for the disciples. They did not want Jesus to die. What are the biggest concerns your family has about your condition? Let's think about family members who most need you to engage with them in the upcoming days.

Question 6:

Have you had the necessary conversations about your end--of--life wishes? There are some important areas to consider that will play an important role in your peaceful passing . Clarity beforehand will help lighten the grief for your family members after your entrance into Heaven.

Question 7:

The question that Jesus asked – “Who do people say that I am?” – took place in the latter part of His ministry as He looked toward the Cross. Your life story holds significance. How will you share this with those who are closest to you? What was important in your life as you look back? What would you like to pass on to your family as part of your legacy?

Question 8:

Your family will miss you so much. Your presence will be missed especially at milestone celebration events. How might you contribute and be present at future events and celebrations? Jesus did this through the Last Supper when He said, “Do this in remembrance of me.”

Question 9:

Can you tell your family members what you are going through as you think about not sharing in their future life events? Have you asked them what they are already mourning about, and what specifically they will miss about you?

Question 10:

Is there anything that you are frightened of, worried, or concerned about as you approach the finish line of your life?

Question 11:

My prayer for you is that you will come to discover a peace that passes all understanding and cling to the message of hope found in Jesus Christ for your salvation. Are there any family members who are struggling with this and who you would like to engage in this conversation?

Question 12:

So much of dying is a mystery. Do you think that God will draw close to you as you die? Are you open to the ways you might experience God that might surprise you? Do you have an understanding of Heaven? I would like to talk to you about this and then have a conversation about this gift of eternal life with your family.

Practice these types of conversation with a friend or spouse prior to having them with a patient/parishioner. Don't start conversations by quoting Scripture. Instead, apply Scripture to what they are saying. Not all questions need to be answered aloud – some questions are best left for the patient to ponder in the privacy of their spirit. Let them drive the conversation.

82%

of people say it is important to put their end-of-life wishes in writing;

23%

have actually done it.

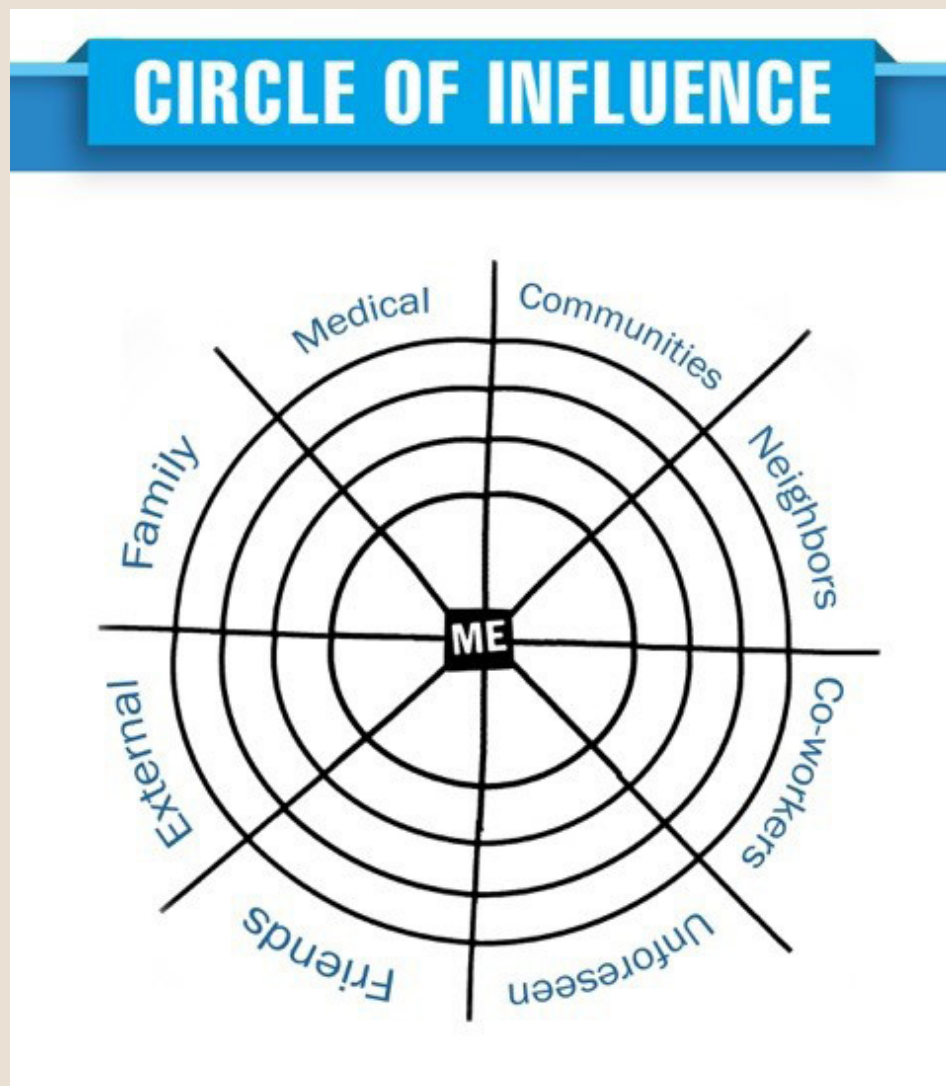
Resources to Prepare for Living Until You Die

CIRCLE OF INFLUENCE

The Circle of Influence chart is an effective tool for understanding who and what might be impacting you, positively or negatively. This can be especially helpful if you are noticing changes in yourself or your loved one. There can be correlations between time spent with certain people and emotional patterns that emerge as a result. It is important to discern what is causing your loved one (or yourself) to respond in certain ways.

Using the chart, fill in each “influencer” area with the people who have been with you the most during the past week. Do a little review. The more time each individual has spent with you (or your loved one), the closer they are to the middle of the diagram, where you are. (Pages 35-37 in **Looking Ahead** explain the different influencers that impact us.)

Once you have identified who is in your circle of influence, you can decide whom you need to keep at a distance (by setting a boundary). Conversely, if there are people who refresh you, you might want to consider inviting them to be more present. The choice really is yours to make.



Resources to Prepare for Living Until You Die

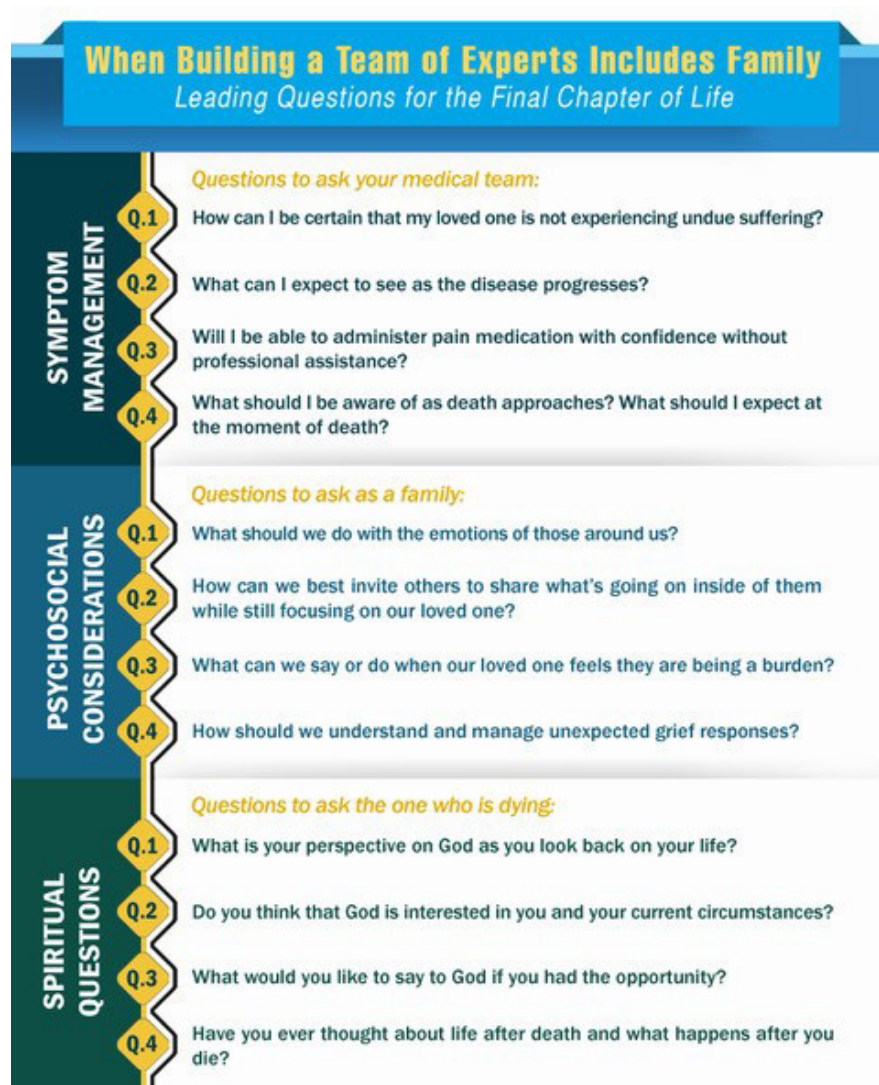
WHEN BUILDING A TEAM OF EXPERTS INCLUDES FAMILY

This chart summarizes the most common questions that need to be talked about during the last chapter of life. Sometimes we are not sure how to address the difficult topics that are in people's minds about the end of life. While we are all different, this list of questions can get challenging conversations started, focusing on three important areas in a person's final chapter of life on earth.

These questions may be asked by:

- the one dying
- a family member
- caregivers

...who are concerned with how to begin to discuss important topics during the unfolding end-of-life journey.



Resources to Prepare for Living Until You Die

SUFFERING: THE WHOLE PERSON PERSPECTIVE

This chart helps us to identify what form suffering is taking in our lives.

Suffering takes on many faces:

- When the body begins to shut down, we may suffer physically with pain caused by the disease.
- When a loved one is no longer in our lives, we may suffer from loss.
- We cannot control the progression of a disease, but we do have the choice to invite people into our lives to alleviate relational suffering.

In addition, it is helpful to determine what we are NOT suffering with (as mentioned in Looking Ahead, pages 133-134) in order to effectively separate out the areas of suffering that require action and those that don't. Some of the suffering can be lightened through intentional steps.



OTHER RESOURCES

Looking Ahead: How Your Dying Impacts Those Around You
(includes PDF Study guide)

SOULfull Conversations: Bringing Family and Friends into Your Last Chapter

Books by Rev. Rick Bergh

The REV. RICK BERGH, PRIEST, AUTHOR & THANATOLOGIST

FR. RICK is an honorary assistant priest at Church of Our Lord in Victoria, BC, Canada. He is also a narrative therapist, thanatologist, and author of eight books. His counseling practice, workshops and online course, Grief Start, focus on end of life and bereavement. Rick also serves as a spiritual care provider at Mount St. Mary's hospital, a long-term care facility in Victoria. He shares many of his ideas on his weekly podcast, It's All About the Story: Grief Stories that Connect Us. (<https://griefstories.buzzsprout.com>). For more information, you can contact him at www.rickbergh.com



AFL Ideas to help the Infirm:

Every patient needs to have an advocate to ask questions and ensure they get quality care. Is there someone in your parish who may need an advocate, because they are alone or their family lives far away?

Make a list of elderly and sick folks in your church and pray for them regularly. If someone is alone, consider visiting, providing a meal, taking Communion, or sitting and reading to them while their care-giver rests or runs an errand.

Get more resources about making end-of- life decisions, including “Embrace the Journey, a 8-week curriculum. Call 412-749-0455 or visit www.anglicansforlife.org/embrace-the-journey

Additional information on MAiD can be found at: www.epcc.ca

Additional Information about assisted suicide in the U.S. can be found at: <https://lozierinstitute.org/map-assisted-suicide-in-the-states/>

All Scripture quotations are from the New Revised Standard Version Bible, copyright 1989.

