

# End of Life Issues

*Note: The following sermon was preached at All Saint' Church in Woodbridge, VA in November of 2021 by Bishop John Guernsey.*

We heard from John's Gospel the great words of Jesus, our Good Shepherd: how he cares for us, his flock. He leads us and guides us; he calls us by name, and he saves us. The thief comes only to steal and kill and destroy. But, Jesus says, "I came that they may have life and have it abundantly."

How timely are those words for us as we see a growing culture of death around us. On this All Saints' Day, as we praise God for faithful Christians on earth and in heaven, it is particularly appropriate that we consider what our faith teaches us about death and about the preciousness of human life.

We find ourselves in a society where life is increasingly devalued, both at the earliest stages of life and at the end of life. The devaluing of life in the womb has inexorably led to the devaluing of life after birth, as well.

James D. Watson, the Nobel Prize winner who discovered the double helix of DNA, once said, "If a child were not declared alive until three days after birth, then all parents could be allowed the choice only a few are given under the present system. The doctor could allow the child to die if the parents so choose..."

Watson's colleague, Francis Crick, has said, "... no newborn infant should be declared human until it has passed certain tests regarding its genetic endowment and that if it fails these tests it forfeits the right to live."

Peter Singer, Professor of Bioethics at Princeton, said, "Killing a disabled infant is not morally equivalent to killing a person. Very often it is not wrong at all."

In his book, *Practical Ethics*, Singer brazenly admits the link between abortion and euthanasia, including the killing of children after birth. Singer writes:

"In dealing with an objection to the view of abortion presented in Chapter 6, we have already looked beyond abortion to infanticide. In so doing we will have confirmed the suspicion of supporters of the sanctity of human life that once abortion is accepted, euthanasia lurks around the next corner....

Singer goes on: "I do not deny that if one accepts abortion on the grounds provided in Chapter 6, the case for killing other human beings, in certain circumstances, is strong. As I shall try to show in this chapter, however, this is not something to be regarded with horror.... On the contrary, once we abandon those doctrines about the sanctity of human life that—as we saw in Chapter 4—collapse as soon as they are questioned, it is the refusal to accept killing that, in some cases, is horrific...." [emphasis added]

Singer goes on to explain that his “total view” ethic treats infants as “replaceable,” just like animals. And this from a professor of bioethics at one of America’s most prestigious universities.

These are not isolated comments. You may recall that in 2019, the Governor of Virginia appeared to endorse infanticide when he said, “The infant would be delivered. The infant would be kept comfortable. The infant would be resuscitated if that’s what the mother and the family desired, and then a discussion would ensue between the physicians and the mother.” I wish that could be dismissed by saying the Governor didn’t really mean that. But the Governor is himself a pediatric neurologist and he knew exactly what he meant when he suggested that the baby might be left to die.

Friends, when it comes to the sanctity of life, we are nowhere near the bottom of the slippery slope.

CBS News reports that in Iceland, Down Syndrome has been almost entirely eliminated, not because they’ve cured it, but because, through the mandatory availability of testing, parents are opting to eliminate through abortion nearly all the children who have it.

Leo Alexander was the American psychiatric representative to the Nuremberg trials, which brought to justice the mass murderers of the Nazi death camps after World War II. Alexander explained the origin of the Nazi Holocaust by saying that it all began with the concept that there was such a thing as human life not worthy to be lived.

Frank Stephens, an actor and spokesman for people with Down Syndrome, testified before Congress. He said, "I don't feel I should have to justify my existence. Is there really no place for us in the world?...Whatever you learn today," he said, "please remember this, I am a man with Down syndrome and my life is worth living."

I can't imagine a more central expression of our faith in Christ than the sanctity of life. Of course, there are other priority concerns and this church embodies many of them.

But the value of human life is foundational. It is rock-bottom biblical truth. It is also a priority concern of our Church. The Anglican Church in North America put in our Canons from day one the directive that "all members and clergy are called to promote and respect the sanctity of every human life from conception to natural death."

These issues affect us all so deeply. Across our diocese, I see members of our churches and our communities who are wounded and grieving over past abortions, and they are struggling over end of life issues in their own families. They are so very vulnerable to this culture of death that is pressing in on teenagers and the elderly and others to take their own lives. And many know the lasting pain after a loved one has taken his or her own life.

This is not one of those issues where everyone in our society agrees on the goal and just disagrees, however sharply, on how to get there. No, there

are forces with growing power that do not share our core conviction about life.

Consider what has happened in Oregon, the first state to legalize assisted suicide. Barbara Wagner had recurrent lung cancer and Randy Stroup had prostate cancer. Both were on Medicaid and the State of Oregon refused to authorize chemotherapy. However, eager to demonstrate the State's compassion, Oregon offered to pay for their assisted suicide. "It dropped my chin to the floor," Randy Stroup told the media. "[How could they] not pay for medication that would help my life, and yet offer to pay to end my life?"

Another Oregon woman, Kate Cheney, was found competent to take her life despite her own dementia and the involvement of an adult daughter described by doctors as "somewhat coercive" in demanding the lethal pills for her mother.

An Oregon emergency room physician was asked by a woman to end the life of her mother who was unconscious from a stroke. He tried to stop her breathing or heartbeat in several ways, finally giving a lethal dose of a paralyzing drug to the older woman who died minutes later. The state board of medical examiners reprimanded the doctor but he faced no criminal charges for this murder, which news reports chose to call an "assisted suicide," and he later resumed medical practice.

When an Oregon man admitted he had, quote, "assisted," unquote, his disabled brother-in-law, Patrick Metheny, by administering lethal drugs to

him, the Oregon attorney general's office responded that this slide from suicide to homicide may be necessary to comply with the Americans with Disabilities Act.

Oregon has a suicide rate 40% higher than the national average and it is rising rapidly. And that doesn't count the so-called "assisted suicides." Suicide in Oregon is epidemic and obviously connected to the State's endorsement and even encouragement of assisted suicide. And yet, in an almost absurdly ironic way, the State's Health Authority claims to be working to prevent deaths by suicide and offers a suicide prevention hotline. A pretty obvious step would be for the State to stop promoting it and stop paying for it.

The supposed "right to die" often, perhaps inexorably, becomes a duty to die. In Canada, when assisted suicide was first legalized in 2016, the pressure on the vulnerable was immediately evident. Catholic scholar George Weigel recounts his experience in the church he attends in the summer. Three elderly members of that church had recently been diagnosed with cancer. Less than a year after the initial legalization of assisted suicide, the first thing each of these elderly women was asked after being told their diagnosis was, "Do you wish to be euthanized?"

Canada's new law only permits euthanizing adults, but parents are already pressuring doctors to euthanize their children and the government is proposing euthanasia for so-called "mature minors."

Wesley J. Smith is a bioethicist who has been one of the outstanding speakers at our Diocese's annual Summit for Life. Wesley Smith has written: "Once one accepts the premise that suicide is an acceptable answer to the problems of human suffering [and ennui], there are no boundaries that will hold for long."

You couldn't find a clearer example of this deterioration of boundaries than in Washington, D.C.

The District of Columbia's assisted suicide law, which went into effect a couple of years ago, is the most expansive and dangerous in the U.S. to date. In the words of Richard Doerflinger, writing for the Witherspoon Institute, the D.C. law "includes [the] explicit requirement that doctors falsify the cause of death. More alarming still, it is designed to ensure that third parties can administer the lethal dose, effectively legalizing homicide. In short, the...law not only allows assisted suicide, it also carves out an exception to the law against homicide. It will allow murder of the sick and elderly, followed by a government-approved cover-up to hide the fact that any lethal action occurred."

Wherever assisted suicide is legalized, purported safeguards are shown to be inadequate and even weak protections are methodically taken away. In 14 years, the Netherlands and Belgium went from euthanizing terminally ill adults, to euthanizing chronically ill adults, to euthanizing physically healthy adults who have lost the will to live, to euthanizing children, to killing those who have neither asked for euthanasia nor consented to it.

In Belgium, one study showed that one-third of euthanasia killings were done without a request or without consent having been given. Almost half of the nurses involved in euthanasia have admitted that they killed patients without consent, despite the fact that involuntary euthanasia is illegal in Belgium and that nurses are not allowed to perform even voluntary euthanasia.

Everywhere assisted suicide has been legalized, the supposed safeguards have been systematically removed. More and more pressure is being exerted on the vulnerable to end their own lives and on medical professionals to participate in the killing.

Roe v. Wade came as a stunning blow that most pro-life folks did not see coming. But there's no way we can say we didn't see the horror that is coming with assisted suicide and the rapid slide into involuntary euthanasia of those deemed unworthy to live.

Assisted suicide now legal in 10 states and the District of Columbia, and the culture of death continues to spread.

We are ministers of love and compassion and healing for those who are in great pain, physically, emotionally, spiritually. But suicide is not the answer.

Moses, Job, Elijah and Jonah all asked God for assisted suicide. They all wanted God to take their life, but God said no each time.



The prophet Elijah won a great victory over the prophets of Baal, but then, as we heard in our first reading, he found himself overwhelmed by despair and a desire for God to end his life. Queen Jezebel was out to get him and Elijah fled into the desert, hopeless and full of fear. He asked God for assisted suicide: he prayed that he might die. "It is enough; now, O Lord, take away my life." Then he lay down and fell asleep, and you have to think that he was hoping he'd never wake up.

But God did not grant his request. Nor did God grant the requests of Moses or Job or Jonah when they all asked God for assisted suicide. They all wanted God to take their life, but God said no each time.

God opposes suicide, whether assisted or not. He cares deeply for those who are in pain. He has great compassion for all who suffer. But God is the author of life and we belong to him. "You are not your own," the Bible says in First Corinthians. "You are not your own, for you were bought with a price. So glorify God in your body."

Our life is God's and it is not ours to destroy. Throughout the Bible, suicide is portrayed negatively. King Saul of Israel disobeyed God and lost the anointing of the Holy Spirit, and then committed suicide rather than be captured by Israel's enemies. And Judas the disciple committed suicide after betraying Jesus.

In both cases, rather than turning to the Lord, they chose to end their lives in despair.

It is clear that the Bible's commandment against murder includes the murder of oneself.

I say to all of us, young people, seniors, those facing great hardship or great pain: Do not succumb to the hopelessness of the culture of death. You are precious to the Lord and to this church family.

When my wife and I were first buying a house, I was concerned about how much to offer. How much was this house actually worth? So I asked our realtor: "How much is this house worth?" And he said, "John, you need to understand that it's worth whatever someone is willing to pay for it."

Hear this: You are of infinite worth because Jesus paid for you with his life, offered for you on the Cross. The Bible says, "You are not your own, you were bought with a price." That price was the blood of Jesus. He paid the penalty for your sin—you belong to him and he loves you. Your life is his—your life is not yours to take, ever. No matter what you experience, no matter how much pain you may feel, Jesus holds you, and this church cares about you, and they will carry you through.

So what can we do:

First, reject the idea that a gravely ill person or a frail older person is a "burden." You are not a "burden." That is a lie of the Evil One. You are not a "burden;" you are a gift. In the Name of Jesus, I break off of you that word "burden" that may have been spoken over you or you may have spoken

over yourself. I cancel that word, “burden,” and I render it null and void in your life in Jesus’ Name.

Second, in the face of whatever pain you know in your life, hold firm in your trust of our gracious God. The Apostle Paul was clear about his own experience of suffering and his deep depression. He wrote to the Church in Corinth:

“We do not want you to be uninformed, brothers, about the hardships we suffered in the province of Asia. We were under great pressure, far beyond our ability to endure, so that we despaired even of life. Indeed, in our hearts we felt the sentence of death.”

But Paul did not take his own life. He let his pain drive him closer to God, and in that greater dependence on God, he found hope. As he put it, “But this happened that we might not rely on ourselves but on God, who raises the dead. He has delivered us from such a deadly peril, and he will deliver us. On him we have set our hope that he will continue to deliver us, as you help us by your prayers.”

And third, continue to care for those who are weak and vulnerable: those in your family, of course, and those in this church family. You are an amazingly loving, caring church. But keep on reaching out in the community to those who are isolated and alone, whether it’s the nursing home resident that no one ever visits, or the person battling mental illness or the pregnant mom in a crisis pregnancy.

I call upon you to honor life, personally, pastorally, publicly; to pray and care for the weak and vulnerable, and to speak for the voiceless.

The Devil comes to steal and kill and destroy. But Jesus came that we might have life and have it abundantly.

As Moses said to the people of Israel, "I call heaven and earth to witness against you today, that I have set before you life and death, blessing and curse. Therefore choose life, that you and your offspring may live, loving the LORD your God, obeying his voice and holding fast to him, for he is your life and length of days." Amen.