

DEATH AND DYING

An analysis offered by Task Force on Ethical Issues in Human Medicine, Office of Research and Analysis, The American Lutheran Church—July 1977.

A. Facing Death

1. Death is a natural event in the course of human life. However, we experience a paradox about death. We have the technological means to make dying easier, yet we may have arrived at a time in life when we have overlooked the meaning of persons. Our society has the technology to keep people alive biologically until life becomes an intolerable burden. Therefore, moral problems exist with respect to death and dying in a technological society.

2. Earlier societies respected death through ritual and customs that gave meaning to the personal aspects of death. Most often death occurred at home. Surrounded by family and friends, dying people were invited to repent of their sins, to bless the children present, ask forgiveness, bid farewell, and make recommendations. Death occurred as a natural experience, expected and understood. Yet death, then as now, remains the most stressful of all human events.

3. Death seems to have lost its public, social, and spiritual character in a new style of dying. What has become important is that one dies in a manner that can be accepted and tolerated by a surviving family, friends, medical personnel, and the church. Today people often experience death in the sterile environment of hospital or nursing home. One may die alone, surrounded by people who often abandon the dying person for multiple reasons. Often the dying person plays the role of the one who does not know, or want to know, that death is imminent. "Shielded," isolated, and sedated, the dying person experiences death as a tragic comedy, supported by a cast of actors and actresses playing deceptive roles in a conspiracy of silence.

B. Affirming Life—and Death

4. We believe in the sanctity of life. This means that life is to be celebrated in the spirit of creative Christian living since life has worth, meaning, and purpose both in its living and in its dying. Christ's work of redeeming and transforming people begins in baptism, yet it is directly related to death. For baptism points in two ways—to creation and to eternity. The one who is baptized dies with Christ and is raised with him. Baptism binds together the believer and Christ within one body, the church. Our baptism is into the death and resurrection of Jesus and is our own journey through death to life, death of the sinful self and the birth of the new

self with all that it implies for the meaning of human life. In the Lord's Supper we experience repeatedly the real presence of Christ in a reaffirmation of life, dignity, forgiveness, and promise. Faith in Christ affirms the fact that his death and resurrection are meant for all persons on this earth.

5. We affirm that death is a personal matter. Strong ambivalent feelings toward death make for our difficulty in communicating with each other about this event. We are both fearful and yet curious about death. Our own personal feelings, personality, hopes, and experience of faith are major factors in our personal fear and denial of our acceptance of death. Coping with our own death and the death of others is further colored by society's attitude toward life. Contemporary society, with its emphasis on youth, affluence, and technology is preoccupied with fun morality. This confuses the wisdom of the ages, affecting values of life as well as of death.

6. We affirm the human right of individuality which allows us to die our own death within the limits of legal, social, and spiritual factors. Death is a personal experience. Our relationship with the dying is a relationship with a person. Persons have the right to die peacefully—respected, cared for, loved, and inspired with hope. Those who care for the dying, namely family, physicians, nurses, and the clergy, merit our high regard for this serious task.

C. Defining Death

7. We seem to need a definition as to when death occurs. Medical and technological advances in supportive therapy and resuscitation measures have given hope to many, but also clouded the issue of when death occurs. No exact biological, legal, or theological determinants are clear. Medical and legal bodies have been seeking new guidelines for consideration on this issue. One resolution calls for a legal definition of death as the "irreversible, total cessation of brain function." Another definition discusses the irreversible cessation of the functioning of all vital organ systems.

8. We affirm that definitions of death consist of more than biological facts. They must also consider the personal and the spiritual dimensions of life. Since the dimensions of biology and personhood are present in every instance of life and death, both deserve equal consideration in any serious attempt to render definition.

D. Sustaining Life

9. When death is judged to be certain and imminent, we affirm that grave injustice to the respect and memory of persons is ren-

dered if extraordinary technology is applied. Our highest concern is for the total person rather than technological curiosity and mechanical performance. We are confronted with values of human and personal life in the face of every death.

10. Wherever life support systems can be used to improve the quality of personal and biological life, we heartily affirm their use. We respect medical advances as marvelous instruments for serving others. Social justice, charity, potential health, and the respect of personhood usually determine the reasons for continuing artificial support systems. We affirm the person's right in these situations to reasonable health care for maintaining and sustaining personal life, if one so chooses. When people consciously will life, experiencing existence with meaning and purpose, suffering is not in vain. Hope, comfort, and love should be shared with those suffering.

11. Christianity has long taught that suffering can have meaning. Through it God can work his grace for the one who suffers and for others. Redemptive suffering is meaningful pain. This is markedly different from the dehumanizing and mindless suffering of the artificially-maintained terminally ill.

E. Allowing Death

12. We affirm that in many instances heroic and extraordinary means used to prolong suffering of both the dying person and the loved ones is unkind. Wherever personality and personhood are permanently lost, artificial supportive measures often are seen as unfair to the dignity of the person and an extreme cost that is burdensome to the family. Families in these cases need not feel a burden of guilt for refusal to try unusual, heroic, and extraordinary life support. Where physicians have determined the irreversible phase of a terminal illness, we affirm that the person, young or old, has a right to a peaceful death. As life draws to an end, with no hope for health restoration, permitting death is often the most heroic, caring, and charitable rendering of stewardship.

13. We affirm that every situation, in the context of dying persons, deserves consideration and decision on its own merit. We affirm that life is to be respected. Respect for the patient requires acceptance by others of that person's desires for life and death. Wise counsel by physicians, the clergy, and members of the health care team should be made available to every family and person facing the crisis of death. Wherever possible, the dying person has a right to be informed of the nature of the illness and the likelihood of imminent death. One should be so informed in love.

14. We affirm that direct intervention to aid the irremediably deteriorating and hopelessly ill person to a swifter death is wrong. While direct intervention in many cases may appear "humane," deliberate injection of drugs or other means of terminating life are acts of intentional homicide. This deliberate act is far removed from decisions which allow people to die—like shutting off a life-supporting machine or even withholding medication. Permission for the normal process of death is an act of omission in the spirit of kindness and love within limits of Christian charity and legal concerns. Direct intervention to cause death, known as direct euthanasia, can not be permitted. We affirm there is a distinct moral difference between killing and allowing to die.

F. Living under the Gospel

15. Christian faith teaches us the duty of preserving health, but it does not hold life to be the absolute value. While we are often helpless to contend with death, we are not helpless in the acceptance of death. We should accept it with all of its devastation to our earthly hopes and values and, in so doing, affirm the ultimate victory we gain in Christ. Our hope is the hope of the resurrection. As Christ affirmed his own death, so can we our death. As he affirmed his death as an event that glorified God, so can we affirm our death. Christ's victory over death makes our death the climax of life, an end to which we have been continually moving.

16. Christians live under the Gospel. In our lifetime, we are called to be good stewards of all that we are and have. Stewardship of life, even our death, is filled with critical moments of tension, joy, and anguish. We affirm the fact of our faith that death, too, has meaning, as life has meaning. We affirm that to the Christian, dying can be the summit from which one can view the totality of one's life, an accounting of personal stewardship. In grace, we can boldly claim the promises of God about life and death. The promises are everlasting.



Printed and distributed by:

Office of Church in Society
The American Lutheran Church
422 South Fifth Street
Minneapolis, Minnesota 55415

Additional copies are available from
AUGSBURG PUBLISHING HOUSE

8¢ per copy; 64¢ per doz.; \$4.80 per 100

Printed in U.S.A.

3-84-20M