Let’s Talk About Death
by George E. Keck, Director of Admission and Interpretation

Do not go gentle into that good night,
Old age should burn and rave at close of day;
Rage, rage against the dying of the light.

With these words, Dylan Thomas, the Welsh poet, sounds the battle cry to which any modern American can respond. For in fact, we do not go gentle into that good night. Death is not an easy topic to discuss because our denial of death is so subtle. For some reason, the church’s understanding of human life has not assisted our society to deal more openly with death and the role of medicine.

The church’s language, at times, has been ambiguous about the reality of death as a natural part of living. Thus we have not helped people live with their mortality. The church, in fact, may be partly responsible for some of the current crisis in medical care by allowing the mission of medicine to be distorted from care to cure.

Death: Natural or Unnatural

During the 1950s-60s, no one was as influential in getting money for biomedical research as was Mary Lasker. As a philanthropist and one-woman lobby in Congress, Mary would declare: “I am really opposed to heart attacks and cancer and strokes the way I am opposed to sin.” Her statement epitomizes the American dream that death is not a natural part of life, but something to be corrected or overcome by research and medical science.

Today, some 40 years later, that confusion about the reality of death and the dream of life continues to plague efforts to develop a sensible health care system. As a health-obsessed society, we do not know what to do with death — other than try to control it. Or worse yet, try to cure it! In short, our denial of death and determination to prolong life has distorted the mission of medicine in America, and, unfortunately, the church, with its ambiguous language, bears part of the blame.

At the same time, the medical profession also shares part of the blame. My son-in-law, Dr. Edward Balaban, an oncologist, tells me that during his years of medical training, “death” was subly viewed as “an accident, unnatural, and correctable.”

When death itself is seen as unnatural, or something to be cured, it becomes all the more difficult to come to terms with the agonizing moral and ethical questions about when to stop treatment of the terminally ill — especially if the patient is an anencephalic infant or a young person with AIDS.
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In short, American culture during the last half of the 20th century, sometimes aided by the church, has inappropriately placed upon those in medical science the unrealistic responsibility not only for the care of illness, but the cure of death. The question before us is whether or not theology and medicine can help one another. Can the church and the medical profession accept death as a natural part of creation/life and then use that common understanding to inform its thinking about patient care during illness and disease?

Our Ambiguity With the Language of Death

The church’s ambiguity in language regarding the reality of death can be illustrated by recalling the public debate over the 1982 Lutheran Church in America (LCA) statement on “Death and Dying.” This statement produced heated debate prior to and during the 11th Biennial Convention of the LCA in Louisville, Kentucky.

The statement began by affirming that “Death is Natural.” Like all other creatures, human beings have a limited life span. “The years of our life,” the psalmist observed, “are three score and ten...” (Psalm 90:10). The fact that our span is limited serves to remind us that we are finite. We are creatures. We are created by God. Both living and dying are part of the created order, which biblical faith affirms as being good.

The document then went on to acknowledge that death may, at times, be “experienced” as an unwelcome event because it involves some tragic dimension such as an accident or the death of a child. Even though death is part of the created order, the sinfulness of human beings can cause death, at times, to be “experienced” as the “enemy.”

Next the original statement spoke of death as a “friend.” When dying involves prolonged suffering, death can be experienced as a friend.

But this was the “lightning rod” which drew the heated debate. At the convention, it became clear that pastors and lay leaders were too ambivalent about the reality of death to have our public language ever speak of death as a “friend”! The debate went on. Finally, the Convention adopted a memorial directing that all references in the Death and Dying statement that call death a “friend” be changed to “merciful.”

This is but one illustration of how the church has not been helpful to church members, or to the public sector, in developing a public mind and language that will help us overcome our denial of death.

Some Ways We Might be More Helpful to One Another in Living With Our Mortality

Speaking Boldly About Death

The language of the church’s pastors/leaders can help shape the language and the belief of the people. Let us review our language related to life and death. For example, to say that someone has “passed on,” or “she is sleeping with Jesus,” or “gone to his reward” is not the most helpful way to deal with the reality of death.

We need to name the name. I remember one phrase from my days in class with Martin Heidegger: “When you are dead, you are dead. Only when you are dead is the resurrection good news!”

Revisiting the Order of Creation

This might be a “lightning rod” for some. But the order of creation language can be an extremely useful theological tool as we struggle with issues such as life and death. The order of creation language might also help us in our current discussion of sexuality, but that is an issue for another article.

Genesis 1 places death as part of God’s “good creation.” Thomas Ogletree, dean and professor of ethics at Yale Divinity School, in a recent lecture argued that the images of the “void, light, and darkness” in Genesis 1:1-5 suggest that God created life out of death and therefore both life and death, light and darkness, are part of the natural order in God’s good creation.

Psalm 90:12 says, “The years of our life are three score and ten, or even by reason of strength fourscore.” The Psalmist reminds us that natural life is limited. Humans are by nature finite. We are created by God; we are not God. Both living and dying are part of the created order, which biblical faith affirms as being good.

The story of Abraham reflects the same view and gives us an image of “going gently into death.” “Abraham breathed his last and died
in a good old age, an old man and full of years and was gathered to his people" (Genesis 25:8).

In short, death was an original and natural part of God’s good creation of human beings who are finite creatures. Death becomes an "enemy" due to sin. As the Apostle Paul puts it, "The sting of death is sin" (1 Corinthians 15:56). Sin pays us "off" by making us fear death (Romans 6). It is our sinfulness that religious or not, then we have a common point of conversation in this pluralistic society.

Helping People Name the Name
Pastors/congregations could review the many opportunities we have to assist people to deal intentionally with death. Our language in preaching and teaching are appropriate and ongoing weekly opportunities to "name the name."

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makes us unwilling to face death and go gentle into that good night. It is sin that feeds our fear of death. It is sin (unbelief) that doubts the promise of the resurrection. It is sin that brings about the denial of death. It is sin that makes us unable to live with our mortality.

Paul could boldly live with his mortality and, in faith, say, "I am sure that neither death, nor life,...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).

By revisiting the order of creation language, we gain in two important areas. First, the language helps us to affirm that death is a "given" within God’s good creation and not a "punishment" due to sin. This affirmation can go a long way in assisting people to deal with their mortality.

The second area in which we gain is in our conversation within the public sector. Not only is relating death to punishment inappropriate, it also draws the term "sin" inappropriately into any secular discourse. On the other hand, if death is a "given" for all human beings, Funerals, of course, are focused opportunities. But in our increasingly urban and busy lives, funerals are no longer the time for the gathering of the community. There was a time when most funerals were in the home where the person had lived. During the past 50 years, we have resorted to having funerals in special funeral homes — places which are certainly not a very "natural" part of our lives. We have funerals during the week when few can be present. Why not move funerals into being part of the regular Sunday service? The community of faith and family are there. The choir and organist are present. What better place do we have to deal with the reality of death than in our normal weekly Sunday gathering of the people of God?

When I was a parish pastor, I found that many parishioners were very willing, in fact relieved, to write down their funeral arrangements. Each year, we would have an adult forum on death and dying — often during Lent. At the final session of each forum, I would provide a form which outlined most of the details needed at time of death and preferences related to the funeral service. As this procedure became public, I began to have shut-ins request the form.

There are other vehicles such as living will forms and organ donor cards which can be used as a means to promote discussion and to help people live with their mortality.

Today there is an increasing number of novels about death and going gentle into that good night. One of the most moving is To Dance With The White Dog by Terry Kay. The Los Angeles Times describes it as "a loving eulogy to old age itself... A tender celebration of life, made poignant by death being so close at hand." Books like this, once read, can lead to hours of thoughtful reflection and discussion in small groups or adult forums.

In short, congregations have a "gold mine" of opportunities during which we can assist people to talk intentionally about their mortality. The Old Testament insight is so valid — to name the name is to have power.

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Dialogue With People in the Medical Profession

Today, many persons in the medical professions are eager to discuss life and death from a religious perspective. My son-in-law and I spend hours talking about these issues. Ethical issues are all around persons in the health care professions. Society has placed some false expectations on them. The church could be an important arena for dialogue during these days of criticism and during the time when we are trying to develop a national health care plan.

Advocate for Public Language and Public Policy

Advocacy within the public political arena does not come easily for many of us. Nevertheless, in a pluralistic society the church must assume a role as advocate in certain issues. Some issues such as abortion are difficult and divide even the religious communities. But if death is the natural end for all human beings, religious or not, then issues related to death should provide a common ground for us to join hands with others.

The task before us is this: We must be able to validate in some way all the positive influences of medical science regarding the timing and circumstances of dying while, at the same time, taking seriously the biological inevitability of death which remains unaltered by scientific progress.

By being an advocate in the public arena, the church can play a role in helping to shape a public language and public mind, thereby helping all people, religious or not, to live with their mortality.

Some references and resources:


“Death and Dying” social statement of the LCA from the 1982 convention.


“Our Fear of Dying” by Daniel Callahan, an article in *Time* magazine, October 4, 1993, page 67.

“Do Not Go Gentle Into That Good Night,” a poem by Dylan Thomas.


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**PERSONAL WORD**

I am a human being — a finite creature.

As a Christian, I see death as part of God’s good creation, but I also see my sin as the cause of my denial of death.

Affirming what and who I am, I now ask, “How should I live, given that I shall die?” I want to live boldly and faithfully with my mortality.

Therefore, I ask my family, the church, and the medical profession to provide care and assist me in dealing with my mortality. For only with your help will I be able to go gentle into that good night.

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GEORGE E. KECK
Three Gifts to Yourself and to Others: A Will, A Durable Power of Attorney, A Living Will
by Andrew J. White, Hagan Professor - Practical Theology

Perhaps it is the wisdom that comes with the aging process, but I have learned that there are three things that I can do for myself that can be of great value to my family. In my case I employed an attorney to assist me in writing each of three documents. Obviously, as I am not a lawyer, I needed the assistance of someone who is. The attorney I employed was a very experienced one. He lectured me on the importance of the durable power of attorney. I had forgotten, if I ever knew, that a normal power of attorney ends with the inability of the grantor of that power to function in an alert state. Thus a durable power of attorney, specifically for health care purposes, is crucial. I have chosen to grant such power to my wife. My oldest son is named as back-up, should my wife be unable to function.

Actually, my power of attorney is a comprehensive one, that is, it covers the essential health care area, but is all-inclusive with regard to all of my possessions. That takes complete trust. My trust of my wife and son is such. Whoever is chosen to be the attorney under such a document must enjoy the confidence of the writer. By the way, I do not recommend that pastors serve in this capacity. Rather, let the pastors stand by as support for those who are called upon to make the kinds of decisions implied.

My final gift, my living will, is intended to guide my wife and son and all care-givers with regard to my own desires under the worst of all physical circumstances. How could I expect my wife to make a difficult decision without my own expression of will? The living will is the way I can make a public statement.

A normal power of attorney ends with the inability of the grantor of that power to function in an alert state.

attempting to do here, information about these can be shared with others in order to help them.

I wish that I had learned the lesson earlier. I would have been a better pastor, a better listener, and a better friend. Let me come back to why this is so later.

My first gift is that I have a current will. Not everyone can say that, but all should be able to do so. Adults owe it to themselves to exercise the stewardship of God’s own gifts to them by preparing a will that reflects the concerns they have for spouse, family, church, friends, and significant causes that are dear.

My spouse deserves to know my love even after my death. She

unit of Clinical Pastoral Education (CPE), I worked with a number of families in the trauma unit. All too often those families were confronted with agonizing decisions about the care of their loved one. The most tragic of the situations seemed always to be when no consensus could be reached.

I saw the frustration of the medics who also were fearful that anything they might do would subject them to legal suits. There were dehumanizing “heroic” efforts to keep alive bodies without functioning brains.

In one of the most heart-wrenching of cases, it was the psychiatrist on the dialysis team who
These days when one is admitted to a hospital, the admissions procedures include inquiry about "advanced directives." My physician has a copy of my living will. Jefferson Hospital, where I last spent time as a patient in 1993, has a copy. My children know of the will and its contents. My pastor knows.

At the end of this article I have included a copy of my living will. It is as comprehensive as I could imagine at the time I signed it in 1990. You don't see such a document very often. I share it with the hope that you will discuss such a subject with those you love with regard to your own wishes and concerns.

Above I said that these gifts, if known earlier, would have made me a better pastor, listener, and friend. A good pastor is one who, among other things, lifts up appropriate questions and concerns for persons to consider. She/He does so out of love and concern for the whole person. It is to be done sensitively. One such set of questions has to do with our view of death. Is it a natural part of life experience, or is it a subject to be avoided?

Knowing now what I know, I would have avoided less and risked more in terms of the kinds of questions I would urge people to address. I would watch for those moments when individuals and families would be open to serious discussion about ultimate concerns.

Implied in the last statement is the art of listening. I would have listened better and spoken less quickly if I had perceived earlier the pastoral value in helping others examine their own deepest fears and working through them to an accommodation with God. A joy in more recent years is the inevitable comment by a student just returned from a unit of CPE who says to me, "I learned to shut up and listen rather than spend my energy figuring out the answer to the next question even before it is put to me."

True friends are persons with whom it feels natural to sit in silence or to talk about risky things. I learned relatively early in my ministry that silence was appropriate, so that was a first step. What I have realized only more recently is that it is a good thing to raise harder questions with those you call friends. Questions of the stewardship of one's life and possessions are good examples. All too frequently we are intimidated by what we perceive to be private matters.

I rather enjoyed the shocked reactions I began to receive almost three years ago. My friends knew that I had undergone angioplasty and that the big heart attack had been avoided, at least for the time. They did not know quite how to take it when I would report my greatest learning from the experience: "I won't live forever, and that is all right!" A few could rebound from the shock and would then engage me in rather profound conversation about life, death, the future for me and for them. Those were the real friends. I wish I had started such conversations years ago.

Part of what it means to be a pastor is summed up in the word intentionality. Obviously that is in relationship to an understanding of God's own intentionality towards us. Whose we know ourselves to be guides the ways and words of our profession. God's own intentions, demonstrated in Jesus Christ, the crucified and resurrected Lord, are what make us bold to receive and offer gifts to one another. If I did not know myself to be God's own child, then the three gifts I have written about above would be terrifying subjects to consider.

Because of God's love in Christ Jesus they are gifts — to me, to those I love, and, I hope, to you, the reader.

A good pastor is one who, among other things, lifts up appropriate questions and concerns for persons to consider.

Whose we know ourselves to be guides the ways and words of our profession.
Instructions of
Andrew J. White
Concerning Life Sustaining Procedures:
“My Living Will”

To my family, my next-of-kin, my physicians, any medical facility in whose care I happen to be:

If I should have an incurable or irreversible condition that will cause my death within a relatively short time or I should become permanently unconscious, and I am no longer able to make or express decisions regarding my treatment, I direct my attending physician to:

- initiate treatment until it is no longer medically reasonable; or
- continue treatment until it is no longer medically reasonable; or
- withhold or withdraw treatment that only prolongs the process of dying
- and is not necessary for my comfort or to alleviate pain.

Further, in the above stated circumstances, I do not desire nutrition and hydration (food and water) be provided by gastric tube or intravenously.

I intend that this directive remain effective until revoked by me by revocation endorsed hereon or by my destruction of this document. I further intend that this document be effective without having been made a part of my medical records or delivery to my physician or any similar restriction on effectiveness as may be provided in any applicable statute.

In the event my attending physician has any question whether a certain procedure or intervention should or should not be instituted or continued or withdrawn, and should I then be unable or incompetent to make or express a decision, I designate my wife, Miriam R. White, and if she fails, my son, Daniel A. White, to make such decision for me.

It is my desire that in the absence of my ability to give directions regarding the use of such life-sustaining procedures, it is my intention that this directive shall be honored by my family and physicians and others responsible for my care. I further direct that anyone acting in good faith reliance on this instrument (my physicians, surrogate, family or next-of-kin) shall not be subject to either civil or criminal liability.

Note: the original of this directive was signed and witnessed on the 18th of January, 1990. It is in a safety deposit box with my will and the durable power of attorney.
THE EDITOR’S WORD
Andrew J. White

In this issue we dare to raise a subject that many would prefer left unspoken: death. What do we fear? Is it death itself or the pain often associated with dying? Is it the fear of loneliness or abandonment? Do we view life as we know it as a state of security, and, by contrast, do we think that the life to come is insecure?

George Keck wants to talk about death in the church. He is moved to suggest this because of the intense dialogue which is on-going with his son-in-law, an oncologist. He offers rather specific suggestions for congregational programming that would create conversation in our midst about death.

For my part, I want to testify to the value of legal documents to put one’s house in order, as they say. Chalk my concern up to two factors. One, my father was an attorney and thus I grew up with talk around the table of estate planning, litigation, justice, individual and corporate responsibility. Two, my own mortality is not a thing I wish to avoid any longer. Rather, I wish to affirm it as God’s precious gift to me. Hence, you have this issue to ponder and, hopefully, to act upon in your own ministry.

Let me push a bit further than we intended in the design of this issue. Does the congregation itself need to face up to its mortality as well as the mortality of the individuals who belong? Will, and should, congregations live forever?

Institutions have lives of their own. Normally, they live beyond the time-frame of the persons who, from time to time, make up their membership. Because of this truth I have been known to say with some frequency, “It is all right for institutions to grant tenure to individuals.” In the context of the educational institution where I work, I mean to say by this that the seminary is bigger than the individuals who work here. It has more resources than the individuals, more staying power, more predictability, and a larger role to play in the life of the church and the community than do the individuals.

On the other hand I have also said with fervor, “Individuals should never give tenure to institutions!” That is not said to under-cut loyalty to one’s employer. After all, I am finishing my 29th year at this seminary. Rather, it is said to encourage the fresh look, the daring venture, the risk of faith on things that seem vital to God and the good of the church. It is intended to prevent institutional paranoia and dry rot.

What I have been implying is that as long as institutions, seminaries, and congregations are afraid of dying, they might, in fact, be living less faithful and vibrant lives than if they faced their own mortality with conviction and hope.

Institutions have no chance to face their mortality until the persons who exist within their frameworks can begin to face their own mortality. So, George and I have tried to open the door for conversation about death. Want to talk?