

END OF LIFE DECISION MAKING:

“ADVANCE DIRECTIVES”

Several weeks ago I was asked to have a Bible study on the subject of “Advance Directives”, commonly referred to as living wills. The purpose of this study is to approach and survey some of the issues involved from a Scriptural perspective. Although the written study will be limited and will focus on “Advance Directives”, we will do our best to answer all questions related to the highly emotional subject of end of life decision making. **NOTE: This is a Bible study and does not in any way constitute legal or medical advice.**

1. When you hear the term “living will” or “end of life decision making” what types of things immediately come to mind?

Suicide, euthanasia, abortion, being kept alive against your will, the right to die, dying with dignity, the right to privacy, being autonomous, quality of life. The list goes on and on.

2. Has you heard of a “living will” or a “health care power of attorney”?
Discuss or have someone volunteer what they know about them.

Living wills allow a person to direct in advance what treatment or steps may be used to sustain life. Health care powers of attorney designate another person to be your agent when and if these issues arise and to work together with your doctor and other health care providers.

3. Minnesota law allows you to inform others about your end of life decision making by way of a Health Care Directive (No longer living wills or durable

health care powers of attorney. This form allows you to either designate an agent [as in the case of a health care power of attorney] or to designate for yourself your choices of treatment, etc. [as in the case of a living will]). Before we go any further discuss the pros and cons of both.

Just have people discuss things as they think of them keeping in mind for later discussion the Scriptural issues involved (i.e., life is God's domain not ours. What is our goal? Is it to care for the person, or is it to end a life?)

4. Why might people like the idea of Health Care Directives?

Be aware of red flags such as "autonomy", "right to die", "dying with dignity", "better use of assets", "relieving burden of loved ones", etc.

5. Discuss the differences between listing situations yourself in which care will be discontinued and designating an agent to make "end of life" decisions.

Discuss differences. Designating an agent allows for discussion and case by case evaluation. Listing situations in advance where care must be discontinued takes us closer to the realm of choosing life or death ourselves.

6. In order to help with decisions that may someday have to be made, let's look at what Holy Scripture says about life and death. Let's look at the following passages together: Genesis 2:7, 9:6; Job 27:3, 33:4; Psalm 36:9; Acts 17:26-6, and Hebrews 3:4. With these in mind, where does life come from?

God!

7. What does it mean in John 5:26 that "...the Father has life in Himself."?

The same thing that it means in Psalm 36:9 that God is the "fountain of life." He is the source of life. He alone has life in Himself. People don't have life in themselves.

8. It is clear from the above that God is the source of life. The life we have is a gift from Him. But now, as we make decisions about our own lives (and the lives of loved ones) we are autonomous...aren't we? See Psalm 139:1-16, Jeremiah 10:23, 1 Corinthians 6:19-20, and Hebrews 1:3 before you answer.

God didn't simply wind us up and let us go. He gives and sustains all life (Hebrews 1:3). He is the giver of all things and He is everywhere. There is no place we can go to get away from Him even if we wanted to (Psalm 139:1-16). We are separated from Him b/c of sin but He still is ever present. Although we may be autonomous in the eyes of the law, we are

not autonomous in the eyes of God. Our lives are not our own (Jeremiah 10:23 & 1 Corinthians 6:19-20). We do not direct our own steps. God – not man – has ordained the number of our days (Psalm 139:16).

9. What is death – is it our friend? See for example Romans 6:23, Luke 16:19-31, and Revelation 21:8.

Death is the state of unbelief and sin that separates us from God. We see this separation and the agony it brings in both the story of the rich man and Lazarus as well as the Revelation 21:8 passage. Death is an interruption of a relationship with God that is healed & repaired only by Christ's life and death on the cross.

10. What does all this have to do with our decision to use Health Care Directives?

Our lives are not our own. We always have to want God's will to be done in our lives (Matthew 6:10 "The Lord's Prayer"). All too often we want our will to be done and we masquerade our desire as something else (i.e. personal autonomy or dignity or preventing suffering).

11. Has everyone heard of Terri Schiavo? She is the Florida woman who has been at the center of a bitter "right to die" controversy. Based upon the Scripture passages we have looked at, how would you analyze her situation?

Discuss the issues involved. Let people say what they want, but direct the conversation from a Scriptural perspective.

12. As an aside, does the fact that something is legal necessarily make it ethical? See for example Acts 5:29.

Absolutely not! We obey God rather than men. Consider abortion, slavery and other things that have been legal.

13. So then, are Health Care Directives OK for Christians, and if so, how should we go about making decisions in regard to them?

We should view them as we are supposed to view everything in our lives – wanting God's will to be done.

14. From the perspective that we always want God's will to be done "on earth as it is in heaven" (Matthew 6:10), discuss what our motivation should be (and what it should never be) in making use of Health Care Directives?

The motivation must always be to "bear one another's burdens" and never to cause death in an attempt to relieve suffering. Death, as we saw above, is not our friend. Although Christians pass through death into life, death is still the enemy (1 Corinthians 15:26). Our motivation for everything we do as Christians is the Gospel! Can we ever imagine sympathy as releasing someone from suffering in this life to eternal

damnation because they did not believe in Jesus Christ? Our motivation is to care for others; to be there for them as they go through suffering – not to fall into the perception that causing death (wherever your sympathies may lie) relieves suffering. God can and does use suffering to further His plan of salvation by bringing people to faith in His Son.

15. How does a passage like Galatians 6:2 speak to how we make decisions regarding Health Care Directives?

We are to carry each others burdens. It is never a proper decision to stop treatment if the aim is simply to remove the burden of care. God uses this “burden caring” to further His plan for our lives.

16. Let's look together at the First Commandment and Luther's explanation in the *Small Catechism*. How does this help us with the questions involved in using Health Care Directives?

Our sinful natures want to be in control – to be like God. This is idolatry and it is at the root of how so many people look at end of life decision making. The view that we are in control and that we have autonomy in life and death issues comes from our desire to “...be like God,...” If we use Health Care Directives that appoint agents we (and the agents) must always remember that life is God's purview – not man's. All decisions should be prayed about and made with the desire that God's will be done.

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