

Caring for the Dying

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MANDATE OF THE COMMITTEE

The task group was asked to prepare a position statement1 for the United Church on current issues that surround life-threatening illness, disability, and death, with a view to assisting church members and congregations faced with making difficult choices.

The need for such a statement was demonstrated by:

- Petition 62 from Muskoka Presbytery to the 34th General Council (see appendix A);
- requests from United Church members asking for materials containing such guidance;
- a report from the former Moderator, Walter Farquharson: in his travels across the country, he found that church members are dissatisfied with the church's apparent failure to address concerns such as the use of life support systems, living wills, and euthanasia;
- the urgency of avoiding futile prolongation of life for chronically or terminally ill patients, and avoiding painful decisions for their families during such prolongation.

Purpose of the Task Group

Our purpose is to assist members of the United Church to draw on their faith as a source of strength that will help them to make loving and responsible choices in life-and-death situations. By confronting in advance suffering and death and the pain, anxiety, and uncertainty they evoke, we hope to empower them to respond honestly to life-and-death issues, even though these will remain painful. By examining and reflecting on ethical dilemmas related to care of the dying, this report provides a framework within which to consider and assume responsibility for painful and perplexing moral challenges. We encourage UC members to prepare for their own "good death" as they continue to live life in all its fullness.

The task group was asked to address the theological and pastoral concerns regarding lifeanddeath choices and to provide guidance for those who make decisions for themselves or
for those they love. We believed our principal task was to set out clearly the real and painful
choices that people face, whatever stance they take concerning such complex and deeply
emotional issues as physician-assisted suicide. In accepting this grave responsibility, we
acknowledged that Christians, indeed all compassionate persons, can reach radically
different conclusions on such issues and we wish to assure those who hold alternative views,
that we have great respect for them.

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