

As he has done in the previous two chapters, Davis takes pains to again establish that how we treat and take care of people who are near the end of life or living in great pain or with various severe dishabilitations, have moral and religious grounding on both sides of the debate. Davis once again reminds us that in order to proceed forward into substantive conversation and debate, we need to first dig down deeper as we move beyond moralizing and throwing out extremist maxims; a “take it or leave it” mentality. Moral and religious arguments both in favor of euthanasia and physician assisted suicide, and against, are more complex and nuanced than many of us have taken the time to investigate. And both for and against arguments start on similar moral footing.

When stripped down to brass tacks, there is no denying the simple truth that euthanasia, similar to an execution, is murder. And murder is always wrong even if the person requests it or “deserves it”. Exodus 20:13, the sixth commandment. Having this framework, *compassion* would dictate that we do everything in our limited power to rally around and support the sick and dying. “... compassion requires that we care for them, be present with them, and do everything we can to make them comfortable.”<sup>1</sup> We would be truly merciful, compassionate, in our abiding presence of standing by. I myself have often spoken to the amazing power of presence learned and practiced during my chaplaincy training in Arcadia Methodist Hospital. Drawing near to death and dying is an act of compassion and mercy.

*Compassion* may also refer to the alleviation of suffering. Jesus’ healing ministry was just that; alleviation of suffering. Not only did he draw near to and abide with the dying, actions utterly appalling to the religious elites at the time as Jesus himself noted in the parable of the Good Samaritan, but he alleviated their suffering with his healing hand. Liberal “thinkers argue that sometimes those measures [euthanasia and physician assisted suicide] are *morally* appropriate waying of affirming the dignity and worth of people for whom life has been hijacked by pain and disease”.<sup>2</sup> While I wholeheartedly agree with the worth and value of abiding with the dying, and somebody, someday, offering me that same grace and mercy, I similarly struggle with the idea of a prolonged amount of time in which, say, someone may need to wipe my own rear end for me. That’s not a very dignified situation for *me*. We simply do not know what it is like to live in someone else’s body. And we certainly do not know another person’s bodily capacity for endurance. Some can endure much. In compassion, practicing grace and mercy, we journey with them on their path towards death however quickly or long that journey might take. Some can endure little; little pain, little hardship. In compassion, practicing grace and mercy, perhaps we consider their desire to retain what dignity they can before peacefully moving ahead into eternity. In either instance, this is the important thing to remember: as Christians who believe in eternity with God, that we were baptized into Christ’s death that we might be risen with him, “life is not the greatest good, to be defended at all costs”.<sup>3</sup>

The reality of every situation is not as clean and clear cut as those who would like it to be one way or the other; totally legal or totally illegal. We need more nuanced and thoughtful dialogue and conversation. *Both* abiding with the dying in their process and euthanasia “can be understood as an extension of [shared] virtues ... compassion, care, respect for human dignity”.<sup>4</sup> In short, together, unified, is the way we go forward. May it be so.

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<sup>1</sup> Davis, James Calvin. In Defense of Civility: How Religion Can Unite America on Seven Moral Issues That Divide Us. Westminster John Knox Press, Louisville, KY; 2010. p 105

<sup>2</sup> Ibid. p 108

<sup>3</sup> Ibid. p 109

<sup>4</sup> Ibid. p 110